

A CRITICAL SUMMARY 10.

OF THE

EVIDENCE BEFORE THE ROYAL COMMISSION

UPON THE

CONTAGIOUS DISEASES ACTS,

1866—1869.

PREPARED FOR THE NATIONAL ASSOCIATION FOR THE REPEAL OF THE
CONTAGIOUS DISEASES ACTS,

BY DOUGLAS KINGSFORD, ESQ.,

OF THE MIDDLE TEMPLE,

LEGAL REPRESENTATIVE OF THE ASSOCIATION DURING THE SITTING OF THE
ROYAL COMMISSION.

COMPLETE IN SEVEN CHAPTERS.

Published separately, Price 4d., post free.

LONDON:

TWEEDIE AND CO., 337, STRAND, W.C.

F. C. BANKS, 50, GREAT MARLBOROUGH STREET, W.

THE NATIONAL ASSOCIATION
FOR THE
REPEAL OF THE CONTAGIOUS DISEASES ACTS.

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INTRODUCTION.

IN this work an attempt is made to marshal the voluminous evidence given before the Royal Commission on the Contagious Diseases Acts, with the view of exhibiting the practical operation of the Acts and of estimating their moral and physical results.

Various points are treated in the order that naturally suggested itself to the writer. The first step that the police, employed under the Acts, have to take is to discover the "common prostitutes" in the various districts to which the Acts apply. How they perform this task is considered in Chapter I. The next thing to be done is to subject common prostitutes to the operation of the Acts, either by voluntary submission or by magistrate's order. These processes are discussed in Chapter II.

The consequences of subjection to the Acts, viz., periodical examinations and detention in hospital if diseased, are considered in Chapters III. and IV., the latter of which also contains a comparison of the advantages of compulsory and voluntary hospitals.

In Chapters V. and VI. the effect of the Acts on venereal disease, and their alleged influence in improving public morality and decency, are respectively the subjects of discussion.

Chapter VII. treats the question of abuses under the Acts.

It will be seen that the evidence before the Commission is almost exclusively referred to, but the writer has occasionally, where it seemed to him necessary or convenient, added references to the evidence taken by the Committee on Venereal Disease and by the Parliamentary Committees on these Acts.

CHAPTER I.

PROOF OF BEING A COMMON PROSTITUTE,

AND THE

MODE OF OBTAINING SUCH PROOF.

No definition of
"common pros-
tstitute."

THE CONTAGIOUS DISEASES ACTS design to prevent venereal disease at certain naval and military stations, by subjecting "common prostitutes" to peculiar regulations.

3112-5; 3377-81;
3692-3; 3699;
8351; 19,544-5;
19,557; 19,582.

The Acts, however, contain no definition of the phrase "common prostitute."

Legislative defi-
nition necessary.

It was of grave importance that a legislative definition should have been supplied, for the following reasons:—

Acton on Prosti-
tution, pp. 1, 2.
Dictionaries of
Webster, and
Johnson.

(1).—Because usage affords no precise definition. The character of the sexual intercourse indulged in, whether "illicit," "indiscriminate," or "with more men than one;" receipt of money or other consideration; "publicly practising prostitution," "plying for hire," making prostitution a "calling" or "livelihood," are variously considered as essential points in the definition of "prostitute." Opinions are similarly divided as to the effect of adding the epithet "common."

To. Com. & Ho.
Lds. Evce.; *ubi*.
post.

(2).—Because under the system established by the Acts, the question what is a "common prostitute" presents itself at every turn. To the woman charged with being and asked to admit that she is a prostitute; to the police constable watching particular women in the streets, or reporting his suspicions to his superior officer; to the superintendent or inspector of police laying an information on oath that he has "good cause to believe" a woman to be a "common prostitute"; to the justice of the peace administering the Acts; and to the visiting surgeon, who must be satisfied that the woman, applying to him for relief from examination, has "ceased to be a common prostitute," before he can grant that application. An answer to the question is now left entirely to the opinion or discretion of the individual. The question is a vital one to every woman against whom proceedings are taken, and large classes of women will be subjected to, or exempted from, the Acts, according to the definition adopted by those who enforce the Acts.

Act of 1869, s. 4,
and sched. form
E.

Act of 1866, ss 16;
32.

Act of 1869, s. 9

Ho. Lds. Evce.,
742; 836-7; 857

Ho. Com. Evce.,
158-65; 374-80;
630-1; 933-6;
978; 1299-301;
1305

19,541-5

Ho. Lds. Evce.,
742

Rep of Ven.Com.
p. li.

(3.)—Because experience under the Acts of 1864 and 1866 clearly proved, and proved to both branches of the legislature, prior to the Act of 1869, the uncertainty, embarrassment, and injustice arising from the absence of an authoritative definition. Yet the reports of parliamentary committees and legislation following these reports ignored the recommendations of visiting surgeons, police and other officials on this point; probably on the consideration that it was desirable to subject to the Acts classes of women who could not be included under any reasonable definition of "common prostitute." By a similar argument the definitions in our criminal law might be expunged. Even the moderate proposal of Captain Harris, (supported by the witness's experience of these Acts and by the strict rule of the French system), that no prostitute be registered without proof of former offences, public notoriety, or other form of conclusive evidence, was not thought worthy of attention.

(4.)—Because it is a dangerous anomaly to create penalties for an undefined offence. A common prostitute is liable under these Acts, not only to periodical examinations and prolonged detention in hospital, but to imprisonment with hard labour for the newly created offences of refusal or neglect to be examined, or to obey hospital regulations. Other statutes, *e.g.* The Towns Police Clauses Act (10 and 11 Vict., c. 89, sect. 28) and The Vagrant Act (5 Geo. IV., c. 83, sect. 3), have, it is true, subjected "common prostitutes" to penalties; but those statutes specify certain overt acts, *viz.*: "importuning passengers in the streets for the purpose of prostitution," and "riotous and indecent behaviour," which are really the offences punished, and without proof of which no conviction can take place.

Definitions vary
in practice

It would be some, though a most insufficient, safeguard, did it appear that in practice under the Acts some precise and uniform meaning is given to the term "common prostitute." But this is not so.

43-51

Superintendent Wakeford, of Devonport, says: "Our (*i.e.*, the police) definition of a 'common prostitute,' is a woman that we have several concurrent proofs is a prostitute; not one particular proof, but several proofs all to the same effect." Such proofs are "solicitation in the streets," "residence in a brothel," "association with prostitutes," "frequenting places where prostitutes resort," "being informed against by men in the army and navy for having communicated disease," and "the woman's own personal admission" of prostitution. The witness

adds that he is speaking of these proofs from memory, and that he never proceeds until he is "positive that the woman is a prostitute *from one or more proofs.*" But the enumeration of various facts which might be used as evidence, does not constitute a "definition" of an offence, nor can such facts be "proofs" till the offence be defined. You must know *what* you are to prove before you can tell *how* you are to prove it. Nor can one see how the witness has any fixed rule of conduct in requiring "one or more" of several proofs, admitted to be of very various degrees of cogency. Further, the witness is at most speaking only of his own practice, and does not assert that the proofs of which he speaks, "from memory," are required from or by his own subordinates, or by the police acting in other districts. Inspector Anniss, of Devonport, says nothing about the "concurrent" proofs, but defines a "common prostitute" as one "who I know cohabits with different men and lives on prostitution." The same witness in another answer omits the "living on prostitution" as an element, and says, "every woman who I know is a prostitute, *i.e.*, who cohabits with different men, I bring on the list as soon as I know it." Mr. Sloggett, late visiting surgeon at Devonport, considers that an adequate definition would be "a woman who habitually subsists on the wages of prostitution;" that a woman "occasionally guilty of irregular conduct" is not a "common prostitute," unless her "conduct makes her notorious" as such; and this witness is certain that no woman who "only went on one or two occasions with a man" could be brought under the Acts. Mr. Ryder, a magistrate of Devonport, who has been on the bench during the hearing of all the cases under the Acts in that borough, also recognizes notoriety of conduct as an element in the definition, and considers that "the same evidence that would be required to convict a person of an offence against the Vagrant Act," would be required under these Acts. The police, however, in the Devonport district by no means consider either habitual "subsistence on the wages of prostitution," or "notoriety of conduct," essential; for Superintendent Wakeford would bring under the Acts "a woman who obtains part of her livelihood by honest employment . . . if she commits immorality with a man," or a woman, not a public and professional prostitute, who "occasionally commits herself with men;" and would regard "as in some degree a prostitute, a woman who goes with more than one man, however occasionally." Inspector Anniss would immediately put on the register a woman who "receives men in a private way in her own

647.

651.

4343.

4338-9; 4341

8254; 8351.

181.

426.

425.

645-51.

613-4.

house," if she cohabits with different men," and prides himself on his detection of private prostitution; a statement which seems somewhat to conflict with one just preceding, viz.: that all the women on the register either live in or resort to brothels. On the whole, it would seem, though the statements show considerable inconsistency, that the superintendent and inspector at Devonport give no effect to the epithet "common," but take as a "prostitute" and subject to the Acts any woman who has illicit intercourse with more than one man.

10,261.

10,262.

Turn now to the practice and opinion at Portsmouth. Superintendent Macdonald clearly differs entirely from the Devonport police. He says: "The Act goes further than 'prostitute;' it is 'common prostitute.' My own idea of a common prostitute is a woman who is obtaining a living by prostituting her body for gain." He is then asked: "It would not then be enough in your opinion that she should obtain money occasionally or in individual cases from such use of her body, but it must be to obtain her ordinary living?" The reply is: "To obtain her ordinary living. I may pass a woman who added to her gains by prostitution as a common prostitute. If she went out into the streets and solicited custom, although she was gaining part of her living by other employment, I should certainly think she was a common prostitute. But where a woman was in the habit of meeting a man in the High-street, Portsmouth, and adjourning to a place we knew well to be a brothel, that act of the woman, or that act repeated, would not be sufficient in my estimation to make her a common prostitute. It must be something more than that; she must be common to any person who likes to hire her." Inspector Westbrook observes a similar distinction, though expressed in another way. He speaks of "living in brothels, and being out for nightly prostitution in company with different men," as the test; and apparently considers neither private nor occasional prostitutes as "common" prostitutes within the intention of the Acts. Mr. Parsons, the Portsmouth visiting surgeon, agrees that the police do not "deal with any but professional prostitutes," and that clandestine or private prostitutes are not touched at present by the Acts." At Aldershot, Inspector Smith would not "consider a woman to be a common prostitute without she conducted herself in a common way," and would not bring a private prostitute, who is visited by various men at her own lodgings, under the Acts, unless she "frequented common brothels," or "houses of accommodation," or solicited in the streets, or in

11,118-19.

11,126, 11,130,
11,180.10,901-3. Cf. Ho.
Com. Evce.
371-80.

11,227-8;

14,359-68;

14,399-404;

14,164-6; Cf. Ho.
Com. Evce, 976;
985.

some way did "precisely the same thing as common prostitutes do."

practice, as to
kind of proof
accepted by po-
lice, varies.

19, 104-5, 424.

1468; 3368;
,111; 11,121;
,374-7; 14,686;
,4731; 14,787.

9354.

365; 10,169;
10,844-7.

657-8; 9354;
,126-7; 11,161

19,558.

636.

1305; 19,706

proof of prostitu-
tion often diffi-
cult.

19,571; 19,574.

Then, too, with respect to the evidence accepted by the police in proof that a woman is a common prostitute, there is no greater unanimity in opinion or practice as to the nature, sources, or effect of such evidence. For example, Superintendent Wakeford states that soldiers and sailors in hospital are visited by the police, who ask them what woman communicated disease, and that this is accepted as one proof that the woman is a "common prostitute;" but the "last and least proof, because we find that soldiers are often but little to be relied on, and if we were to act on such evidence as that, we should make continual mistakes; for such statements might be made through malice, or any motive other than the proper one. . . . For a man may desire to screen a woman . . . and may give a description of some woman who is not the one who actually imparted the disease; or he may make a mistake in the woman." And other evidence, police and medical, seems conclusive that in fact statements of this kind are often false and always unreliable. Yet Inspector Annis says: "If a sailor or marine is in hospital and says that a certain woman has communicated disease to him, she is bound to come up to be examined." As to the value of information given by prostitutes to the police with respect to other women who ought, in the opinion of the informant, to be subject to the Acts, two superintendents of police and a visiting surgeon concur in saying that prostitutes are "so many policemen" in bringing other women on the register, while two inspectors agree that the information of prostitutes, actuated by jealousy or other misleading motives, cannot in any way be depended on. On the other hand, as an illustration of the dependence of the police on such evidence in certain cases, four registered prostitutes were on one occasion, in the Woolwich district, called by the police to support a charge of prostitution. Again, there is a conflict between the assertions that "the police do not get much assistance from brothel-keepers" in putting women on the register, and that "women are generally brought under the operation of the Act through the brothel-keepers."

It may be readily admitted that in the great majority of cases the police are able to obtain very sufficient proofs of the character of the women whom they register. But it is to be observed that direct evidence of prostitution is very seldom available. The evidence must usually consist of facts forming presumptions of greater or less cogency. And error is especially

likely to arise, either from mistaking the facts, or from giving them undue weight as presumptions of guilt. Residence in a brothel and solicitations in the streets or elsewhere form strong presumptions of prostitution; but even of these two proofs, one, viz., street solicitation, on the evidence of some of the police, seldom offers itself, and, unless of a very gross or obtrusive character, cannot be adequately proved except by the man solicited.*

381-4. With respect to such facts as association with prostitutes, or frequenting places where prostitutes resort, they afford very weak presumptions against women tending towards or recently emerged from prostitution, or against a numerous "fringe" who, though not belonging to the prostitute class, 19,571. from various causes, *e.g.*, residence in the same part of the town and belonging to the same class of society, being their laundresses, sempstresses, or servants, &c., are on terms of intimacy and consort with prostitutes. So being constantly in the streets at night in the company of different men, proves nothing against girls engaged all day in labour, who have only the evening for exercise and recreation, and who with freer manners may have morals as pure as girls of higher social grade.

913; 19,713-4 Even of the most public proofs of prostitution the superintendent or inspector of police can seldom be directly informed by his own personal observation, but must depend on the general report of the constables who watch the women in the streets.

Append C. p. 829
17,439: 17,447-8 Further the police are embarrassed by the necessity for immediate action. They have express instructions that "all new-comers into the district, being known prostitutes, are to be brought immediately under the Acts," and these instructions are obeyed to the letter. 14,236.

237-40; 365;
657-8; 9201-2;
9268-9; 11,119;
11,121; 19,706-11 Then as to private prostitutes, frequented at their own lodgings and not betraying their character in public, the police have to rely on the information, often by letter and anonymous, of men who visit these women, of prostitutes, or of persons anxious about the respectability of the streets in which they live—information which, from the nature of the charge and the motive of the informant, is likely to be given under jealousy, spite, wantonness, or error. That such information is constantly false the police themselves admit; while, in aid of it, the only resource of

* The writer has on several occasions heard the police give evidence of solicitation, but it has never gone beyond the statement that the woman was seen to accost a man or men in the streets, the witness being unable to prove that the purpose was prostitution.

the police is constant observation of the accused, direct inquiry at the house where she lives, or a tentative order to her to attend for examination, supplemented by a request for her signature to the voluntary submission.

Nature and mode of police espionage and inquiry. The following cases illustrate the nature and mode of police espionage and inquiry:—

(1.)—The police employed under the Acts, are regarded as “private inquiry” detectives. Thus a respectable woman having applied for employment at the dockyard of Devonport, these police made inquiries about her character, and her friends “felt it very objectionable that her character and position should be the subject of inquiry by that class of policemen.” It is fair to add that the witness, a magistrate, had no proof as to the identity of the police who made these inquiries, though he and the woman’s friends, after inquiry made, believed that they were the special police.

11,166; 11,171-4 Sailors at sea have written letters to the police asking for reports as to the conduct of their wives in their absence, though the police have not supplied the information asked for.

7206-23 (2.)—The police called twice the same day at the house of a respectable working girl under 16; said that she must come up for examination, unless medical proof could be given that she was not diseased, and that they had been sent to look for a girl of her name. Neighbours remonstrated, but the police laughed saying that the “young ones are often the worst.” The mother had her daughter examined by a private surgeon (name and address given), who reported that she was an innocent girl. The police afterwards met the girl in the streets and said that they had mistaken her for someone else. The errand of the police became public, and the girl suffered from suspicion and taunts. These and other details, on the statements of the grandmother and mother of the girl (well-known to the witness), were confirmed by the master and mistress and other people residing in the house, which was let out in parts to various tenants. The inspector of police of the district did not give any personal answer to this case though he had an opportunity. But

13,349. Captain Harris produced a report of the superintendent with respect to it, from which it appears that two constables of police called at the house and saw the girl, and finding that she was not the woman they wanted, asked to see her mother on the chance of her being so. The police said and did nothing more. They had acted on information that a prostitute named Annie Brown had “communicated disease to a retired naval officer.” The girl

seen possessed the same common surname, though her christian name was different. We invite attention to the complaint and the police answer to it; and ask which is more credible, the former with its details, or the latter with its vague denial? Further, assuming the police account to be strictly accurate, does it show that the police act on several concurrent proofs, after a minute inquiry which makes mistake impossible, discharging difficult duties with caution, moderation, and the greatest solicitude not to injure the character and reputation of innocent women?

9201-2. (3.)—Inspector Anniss (on his own statement) received several anonymous letters about a woman, of the same name as one he was looking for; “she had communicated disease to an officer.” Called at the woman’s house and saw her, but she was the wrong woman. Told her why he was there. Has received more letters about the same woman since. Is sure that mistakes never occur, and that in the above case the woman’s “character was not compromised;” he “took care to guard against that.” This illustrates the witness’s assertion that “no woman is even spoken to before we know well that she is a prostitute.”

9200.
9268-73;

1178

3378-99.

(4.)—A respectable woman (name given), a stranger to the district, on her way with her sister and intended husband—(a corporal, name and regiment given)—stopped on the public road, and questioned by special police. Married two days afterwards. No answer whatever is given to this case by the police.

8422

9369-70.

(5.)—Police went to house of respectable working man (name given), said his daughter must come to the hospital to be examined, for from information received they knew she was leading a bad life. Father and mother protested. Police were angry and went away to the house of another (married) daughter, giving the same order to her. Her husband protested. The police said they must have been misinformed and went away, not calling again. The police inspector’s answer to this is that he “never had a girl of the name given on the register,” no contradiction to the above statement, which asserts that the police attempted but failed to put these women on the register.

8418.

(6.)—The wife of a dockyard officer walking with her sister stopped and insulted by the police. From description of the policeman’s person, witness suspects he was a constable (name given) of the special police. No answer to this.

3499-501.

(7.)—A clerk at a railway station was standing at the door of his house with his wife, when Inspector Anniss “came across the street towards his wife, unnecessarily close except for inves-

9206-22. tigation, looked her fully in the face and from head to foot, and was very offensive in his manner." The young man "remonstrated with him for doing so, and called him by his name, when the inspector in reply said he had a perfect right to do so, it was his duty." The inspector answers this case by saying that he should "certainly think the lad was not married then;" he "did not know this lad, who was a boy and not a man certainly then;" it was three years ago, and at eleven o'clock at night; the place where the young man was standing was in an angle of a wholesale draper's shop that had been recently altered, and this is not the young man's present house; his (the inspector's) "own impression was at the time, after finding him give his name, that it was one of the shop-girls he was keeping company with," and he was "looking to see what they were doing there;" the young man did not speak to the inspector "in a proper manner," and "the young lady who was with him, who seemed quite alive to the responsibility, corrected him for the way he spoke."

4156. (8.)—The late Rev. Mr. Heritage told Mr. Sloggett that a "virtuous and respectable woman of his congregation was spoken to by the police." Although Mr. Sloggett "promised on the part of the Secretary of State for War and the Commissioner of Police that the strictest investigation should be made into it," yet Mr. Heritage declined to give the woman's name; an objection, as Mr. Sloggett admits, not altogether unreasonable.

4618-22. 12,585-98; 12,798-819 (9.)—Several instances of respectable women "watched and followed to their houses," addressed by the police, and in some cases ordered to attend for examination. Widow of a naval officer left the neighbourhood in consequence of persecution by the police. The names are not given, but were known to the witness.

674; 12,703-6 (10.)—The doors of factories watched by the police, who in mid-day follow and address in the streets the girls employed there.

19,548. (11.)—Mrs. D——— (name and address given) had four daughters living at home with her. Police came to her house, said they had been sent there by girls of the town, insisted on seeing the daughters, and ordered them to attend for examination. They refused, being respectable girls. One of the daughters afterwards went out one evening. The police called again the next day and told her of every place she had been to, showing that she was followed all the time she was out; they also asked the names of two acquaintances (men) to whom she had spoken in the street, and ordered her again for examination.

None of the daughters went up for examination, and no further proceedings were taken to compel them. Afterwards Mrs. D—— and her daughters were frequently called after in the streets and asked disgusting questions; in consequence they were afraid to go out, and in one instance the annoyance was so great that Mrs. D—— appealed to the local police for protection.

19,548; 19,549-51 (12.)—Many other cases, supported by depositions of women and witnesses, carefully prepared by a solicitor accustomed to take evidence, shewing annoyance and persecution by the police in attempts to induce women to attend for examination.

14,380-1.
Ho. Com. Evce.,
1038-40. (13.)—Domestic servants are watched and, if found to be “conducting themselves as prostitutes,” are brought under the Acts, but never ordered to attend the hospital for examination without communication made to the master or mistress.

19,823-4. (14.)—Girl who had been “only with one man,” ordered up to the examination room.”

13,356. (15.)—Captain Harris apparently admits that improper molestation of women has occurred, but suggests that it may have been by men personating the special police. He mentions two instances in which such personation was suspected or detected. It is significant of the difficulty in identifying the “plain-clothes” policemen employed, and of the vagueness in the general opinion of the powers intrusted to them, that the people who were molested by these impersonations, do not seem to have thought of resisting in any way, “imagining they must be officers employed to carry out the Contagious Diseases Acts.”



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TWEEDIE AND CO., 337, STRAND, W.C.

F. C. BANKS, 50, GREAT MARLBOROUGH STREET, W.

NOTTINGHAM: PRINTED BY STEVENSON, BAILEY, AND SMITH, LISTER GATE.

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INTRODUCTION.

IN this work an attempt is made to marshal the voluminous evidence given before the Royal Commission on the Contagious Diseases Acts, with the view of exhibiting the practical operations of the Acts and of estimating their moral and physical results.

Various points are treated in the order that naturally suggested itself to the writer. The first step that the police, employed under the Acts, have to take is to discover the "common prostitutes" in the various districts to which the Acts apply. How they perform this task is considered in Chapter I. The next thing to be done is to subject common prostitutes to the operation of the Acts, either by voluntary submission or by magistrate's order. These processes are discussed in Chapter II.

The consequences of subjection to the Acts, viz., periodical examinations and detention in hospital if diseased, are considered in Chapters III. and IV., the latter of which also contains a comparison of the advantages of compulsory and voluntary hospitals.

In Chapters V. and VI. the effect of the Acts on the venereal disease, and their alleged influence in improving public morality and decency, are respectively the subjects of discussion.

Chapter VII. treats the question of abuses under the Acts.

It will be seen that the evidence before the Commission is almost exclusively referred to, but the writer has occasionally, where it seemed to him necessary or convenient, added references to the evidence taken by the Committee on Venereal Disease and by the Parliamentary Committee on these Acts.

CHAPTER II.

VOLUNTARY SUBMISSION AND MAGISTRATE'S ORDER.

Act of 1866, ss.
16; 17

THE modes by which women are subjected to the Acts are two; voluntary submission and the order of a magistrate.

Voluntary sub-
mission the usual
mode of subjec-
tion.
187; 191

In practice, however, the voluntary submission is the means almost exclusively adopted, for out of seven or eight thousand women subjected to the Acts, prior to March 26th, 1870, only about twenty or thirty were so subjected by a magistrate's

Col. Henderson's
Rep. p. 3.

order.

It becomes, therefore, especially necessary to enquire whether the voluntary submission is a satisfactory process.

Original inten-
tion of the Act
of 1866.

The original intention seems to have been that women, who admitted that they were prostitutes, should come of their own accord and sign the submission. It was supposed that many such women would be glad to avail themselves of the medical examinations, as a security to themselves. Accordingly the Act of 1866 provided no punishment for refusal to be examined after having signed a voluntary submission, because the probability of such refusal was not contemplated. As a fact, however, no women ever presented themselves of their own accord, but the police found the voluntary submission, if tendered for signa-

Voluntary sub-
mission found
most convenient
by the police.

ture, the most convenient, and indeed the only practicable, method of subjecting to the Acts considerable numbers of women; while all objection to it, from the police point of view, was removed when the Act of 1869, by sect. 6, gave the submission the same effect as a magistrate's order. The convenience of the submission to the police is obvious; it can be tendered tentatively to any woman with respect to whom the police have suspicions, though without such proofs as could be produced to a magistrate; if the woman refuse to sign, further information about her can be sought, or pressure can be applied by vague threats of the penal consequences of refusal: if she sign, she is at once registered, and the police escape the labour of obtaining further information, and avoid the trouble and uncertainty that a judicial inquiry would entail.

1868-91. 17,405,
19,716.

Objections.

Objections to the so-called voluntary submission are :—

signed involun-
arily.
3000-59,

(1.)—That there is no security for its being, and in many cases it is not, the voluntary act of the woman who signs it.

95; 905-9; 914;
19,716; 19,879;
17 413
10,169-70;
14,375; 17,406;

(a.)—The subordinate police take the initiative, and “warn up” a suspected woman *for examination*, thus giving an opportunity to the police inspector to obtain a signature to the submission.

3047-50; 8274-5

(b.)—The submission is attested by an inspector of police, who is not an indifferent person. He is in fact the woman’s accuser, since he, acting on the suspicions and report of his constables, has ordered the woman to come to him.

3027; 3051;
3220-7; 6566

(c.)—The signature is taken in the inspector’s room, and no independent witness on the woman’s behalf is allowed to be present. Should any question as to the validity of the submission so signed afterwards arise (as may happen in the event of the woman’s being brought before the magistrates for refusing to be examined), everything is assumed in favour of its validity; the police, who in that inquiry are necessarily adverse to the woman, tell their own story, and the woman’s mouth is closed.

9159-60.

(d.)—Persuasion is admitted by the police to be used in order to induce the woman to sign. What would occur if it were to appear at a criminal trial that the police, who apprehended the prisoner on suspicion, had supplemented the evidence against him by *persuading* him to confess his guilt?

191; 895

(e.)—The police admit that they always tell the woman that she will be brought before the magistrates if she refuses to sign. This threat is obviously a forcible one, whether the woman is innocent or guilty. If the woman sign on this threat, the only fair conclusion to be drawn from her signature is that she prefers signing to being taken before the magistrates. The police appear to treat refusal to sign as in itself an offence, giving them, as it does, extra trouble, and impugning the accuracy of their suspicions. It is very significant that in the recent House of Commons return (No. 388; July 27th, 1871) of the number of proceedings under the Acts, we find a column headed—“Women proceeded against *for refusing to sign the voluntary submission form*.” Of course applications for magistrates’ orders are intended, but the wording of the return, furnished by the police, shows the view taken by them of the character of the proceeding.

See Append. B p
794

Act of 1869.
ched. Form F,

The Act perhaps justifies the police, for in the form of summons the woman is told that she may escape appearance before a justice and inquiry into the truth of the police information, if

she prefers it, by signing a submission (not here called voluntary) in the presence of the superintendent of police. We venture to think that no other penal statute is to be found, that provides a summons on a quasi-criminal charge, giving the accused the alternative of exposure to a public and shameful inquiry, or self-crimination.

3601-8; 3054-9; (f.)—The police have used threats or pressure of various
3680-1; 17,416; kinds in order to induce women to sign. In addition to the
17,451; 19,577; direct evidence on this point, there is the admitted fact that by
20,299 printed instructions issued by the War Office and the Admiralty
2649-51; 3008; the police had the following directions: "All women subject to
3671-84; 16,511-6; the provisions of the Acts are to be *called upon* to sign the
4437-40; 17,421-7; voluntary submission paper. Should any woman object to sign
19,577-8 she is to be informed of the *penal consequences* attending such
Appnd. C. p. 829 refusal." It is true that the paper containing these illegal
2651; 4437; 16,511 directions is said to have been withdrawn after being exhibited
17,423-6 for many months; but that withdrawal was due to public
4437; 16,513; attention being directed to it by opponents of the Acts. And to
16,516; say that this instruction was an "oversight," and that in fact
899 no penal consequences follow refusal, does not touch the argu-
10,325-31. ment that the police have been expressly ordered to use pressure
in order to obtain signatures to the voluntary submission. It
is significant that Superintendent Macdonald, of Portsmouth,
asked whether he was instructed "to point out to the woman
the penal consequences of not signing," replies, "No, I think
not. *That is done nevertheless*," and explains "penal" to mean
that "punishment will follow." The instruction, whether
withdrawn or not, has of course done its work in giving a
tone to the proceeding of the police.

Signed under
misapprehension (2.)—That there is nothing to ensure that the nature and
effect of the voluntary submission shall be understood, and that
in fact they are not understood, by the women who sign it.

Act of 1869.
sched. Form H. The form of the submission does not explain its nature and
effect:—

19,686-7; 19,577; (a.)—The character of the "periodical medical examination"
12,878 is not stated; and many women are ignorant that they thus
consent to a surgical and instrumental inspection.

19,575; 19,579 (b.)—There is no admission of being a common prostitute on
9410. the face of the submission. Yet the submission is always
accepted (*e.g.* in proceeding against a woman for refusal to be
examined) as such an admission. It is remarkable that the
enacting clause of the Act (1866, sect. 17) provides that "any
woman" may sign the voluntary submission. On this point

too, in addition to cases mentioned below where women, who denied being prostitutes, have yet signed the submission, may be observed the admitted practice of the police to take signatures to the submission from women returning from homes to hospital in consequence of a recurrence of disease. Such women were clearly not "common prostitutes" at the time of signing.

(c.)—After signing the submission, women are not only liable to examination, but also to a lengthened detention in hospital if diseased and to imprisonment and hard labour for refusal or neglect to be examined or to comply with hospital regulations. These consequences are the direct result of signing the submission, because the woman, by signing, becomes enrolled in a peculiar class to which alone those consequences can attach. Yet there is nothing on the face of the submission to point to any other consequence than that of medical examination.

(d.)—The Act says that the submission may be for "any period not exceeding one year," and the option of fixing the period is clearly that of the woman signing. Yet the submissions are; with scarcely an exception, for the longest period that the law allows. One inspector indeed stated that he had sometimes "taken" them for a shorter period; but he was unable to produce any instances from his books; and his explanation of his reasons for so doing shows that he assumed for the police, and ignored for the women, the power of fixing the period. It is not pretended that the women knew (what the police did not) that they might sign for any period, nor that their wishes on this point were in any way consulted. This matter is of the more importance because there is an impression on the part of the women that they are bound to continue prostitution during the period named in the submission; or to come up for examination during that period, even though meanwhile they quit a life of prostitution. The latter impression is produced by the practice of the police and by the lax wording of the Act.

(e.)—The police ignore sect. 32. of the Act of 1866, which provides that a magistrate's order (and *a fortiori* a voluntary submission) shall cease to operate upon discharge of the subjected woman cured from hospital. The intention of the Act seems to have been that there should be a presumption that such woman had given up prostitution, and that therefore fresh proof of prostitution should be had against her before she could be again subjected. But this would involve continual trouble to the police, and to avoid that they adopt one or other of the following practices, all of which are in direct contravention of

the letter or spirit of the Act. At Devonport the police for three years and a half (*i.e.*, from September 1866 till February 1871) ignored this provision of the Act altogether, and the "old submission was held to be good" in spite of the discharge from hospital. At some time or other in 1868 or 1869 (when the regular inspector was absent from duty) a practice illegal, though not so obviously so as the practice of the regular inspector, obtained, *viz.*, that of getting a woman to re-sign a submission before leaving hospital. The illegality of both these practices having been at last discovered, the present plan, equally illegal, was substituted; under which a woman leaving hospital is told by the police to appear for examination within 14 days as usual, and on her appearance at the examining room she is "called upon" to re-sign the submission before examination.

At Portsmouth, the police "considered the written signature of the woman consenting to periodical examination to hold good for 12 months, whether she had been in hospital or not;" but now this is altered, the police see the woman before her discharge, ask her "'are you going back to the streets again?' And if she says 'yes,' she is noted to come back again in 14 days for examination." The objection to this is, that a mere statement of intention as to future conduct is substituted for the fresh proof of prostitution that the police ought to obtain.

The practice at other stations is not explained, except that it appears that the inspector of police at Canterbury, "if a woman went into hospital, struck her name off the register," replacing it again when she came out if necessary. This would seem a most harmless practice, erring only on the side of caution, and quite in accordance with the Acts. But it was a practice which the Commissioner of Police considered "no man of common sense" would have adopted, and was the chief ground why the above inspector was removed from his duties under the Acts.

(f.)—The police do not explain to the women the nature and effect of the submission. Even if the form be read to the woman, as stated by some witnesses, this is not enough when the nature and effect do not, as above pointed out, appear on the face of it. It cannot be fully understood without a knowledge of the Acts and the practice under them, and such knowledge is certainly not usually possessed by a class, numbers of whom cannot read or write, by women only just lapsed into prostitution, or by women not prostitutes at all, to whom the submission has been improperly tendered for signature; the difficulty of obtain-

1539.

2103-4; 3009-24;
9172; 9281

912; 9164

Ho. Com, Evce
253,

10,815-6; 11,205

13,358

3035-7; 8274;
14,567

9167; 14,384;

See however
9167
233; 3034; 14,384

ing such knowledge is shown too by the admitted facts that gross mistakes as to the law on this point have been made and persisted in by Government Officers who direct, and by superintendents and inspectors of police, specially selected for their intelligence, who carry out the practice under the Acts.

One police inspector indeed says that he explains the submission to women signing it for the first time, but his explanation touches only one of the points on which we have shown explanation to be necessary.

(g.)—Concurrent statements of many women prove that they have signed the submission under misapprehension, or without a full knowledge of its meaning and effect. These statements, it must be remembered, form the accumulated testimony, not only of hundreds of women still subject to the Acts, but of women who though once subjected have passed into respectable society, and who could therefore have no motive to deceive.

(h.)—The voluntary submission, where a woman has been so subjected, is the warrant for the visiting surgeon to examine her. Yet it appears that this document is not shown to the visiting surgeon, but filed by the police. As a result of this omission, women have been subject to examination who had never signed a submission, or whose submission had expired.

Lastly, there is the general objection that it is most dangerous to leave in the hands of a few policemen such a process as that of subjecting women to the Acts through the voluntary submission. The inspector and his constables combine the offices of detective, informer, witness, and judge. The Acts provide no one as a check upon them, and there is no likelihood that their practices will be known. Recent cases have shown what needed no showing, viz., the tendency of police to adhere to a clue once seized, and to accept only evidence that squares with their theory of guilt. No excess of care and no amount of individual discretion could justify the making liberty depend on the decision of an inspector of police. Would public opinion tolerate a law by which unconvicted criminals should be placed under police surveillance by a process similar to that of the voluntary submission of these Acts? Yet crime is defined and comparatively easy of direct proof, and police surveillance of criminals involves consequences less serious than those of registration under the Acts.

The authorities, it is clear, have been gradually roused to the consciousness that the voluntary submission process is not a satisfactory mode of subjection to the Acts, without some sort

9160

102 ; 3033 ; 3038 ;
6443 ; 8274 ;
20,299

10,817-9

17,406-12

General objection
to discretionary
action of police

19,994-6

This objection
admitted by the
authorities

16,532

16,533

of check on the discretion of the police who put it in force. Thus Mr. Vernon Lushington observes, "I think that the visiting surgeon ought not to examine any woman until he has satisfied himself upon the statement of the police, and from any other evidence, if necessary, that the woman is subject to the operation of the Act, being a common prostitute;" and, asked further whether he would give a visiting surgeon a quasi-judicial position, replies, "Yes, of course great care should be taken not to subject any woman to an examination unless she be plainly and beyond all doubt a common prostitute. And although the police have very carefully performed their duties, and I am not aware that they have in any case gone wrong, yet I do not think it is a duty which should be confided simply to the police. The police ought to be under the superintendence of an administrative officer. . . . I certainly think those duties of the police ought to be subjected to a close and constant scrutiny on the part of the public, and I should be very sorry if at any time that scrutiny were idle."

Append. D. p.
829

Confession to
visiting surgeon
1202; 1240; 4006;
8941

Accordingly, it appears that by direct "Confidential Instructions for Visiting Surgeons," issued by the Admiralty in June, 1870, the following order has been given:—"On the first appearance of every woman for examination, the visiting surgeon will make sufficient inquiry of herself and others into her history, so as to assure himself that she is liable to the provisions of the Act, and this notwithstanding she may have previously signed the voluntary submission certificate required under clause 17 of the Contagious Diseases Act, 1866." This order has been acted on at Devonport, where the visiting surgeon "asks the woman questions about the life she is living," and takes her "confession of prostitution for a longer or shorter period."

It is at least a novelty that, the Acts having omitted to provide any check on the discretionary action of the police, that omission should be supplied, not by an amendment of the Acts, but by instructions emanating from Government Offices conferring judicial functions on a visiting surgeon, who may be supposed to have been selected for his skill in detecting contagious venereal diseases in women.

Append B. p 780

Since at some stations the number of new women registered is three or four hundred annually, it will be no mean addition to the duties of the visiting surgeon to satisfy himself that each woman so registered is a common prostitute. His only practical means of inquiry will be to ask the police inspector formally

what the woman's character is. The inspector by taking her voluntary submission and sending her in for examination has already for himself answered that question, and can give no other answer without acknowledging himself guilty of a gross breach of duty. Or the surgeon may ask the woman point-blank, "Are you a common prostitute?" (presumably defining the term for her edification), and thus give her an opportunity for self-crimination.

Illustrative cases

In addition to cases illustrating objections to the voluntary submission, referred to above, some further ones may be mentioned in detail that have not been so referred to. It must be remembered that these are only a few of those that might have been produced. And for reasons urged in another place, it may fairly be inferred that the cases that are or might be produced form but a tithe of those that have actually occurred.

1555 (1.)—A girl of 15, who had "signed a voluntary submission for the inspector of police," was brought to the visiting surgeon to be examined. He, on hearing her story, was convinced that she was not a prostitute, and sent her away without examination.

9295 This girl had apparently been seduced shortly before this occurrence, but the police inspector had no evidence of prostitution against her, except that he saw her at "a dancing place, and spoke to her with another girl, giving her a caution about being there;" and that when brought by her father and aunt to the examining-room, the inspector asked her "whether she had been acquainted with men," to which she said, "Yes."

3115-8; 3213-5 (2.)—Harriet Hicks, who had lived with one man for six years, signed a voluntary submission. The magistrates, on a subsequent application to them (to which reference is made elsewhere), credited the evidence of the man with whom she was living, that she had been faithful to him, and ordered her to be relieved from examination.

758-72; 1168-9 (3.)—Maria Bennett signed a voluntary submission. The only evidence, that the police had against her when she signed, was that she had been seen in the company of prostitutes. It is not necessary to inquire whether she was or was not a prostitute, the case being here introduced merely to illustrate the action of the police without sufficient proof of prostitution.

8427-9 (4.)—Lavinia Lambert, living with one man at the time she signed the submission. This is answered by the nurse (wife of a constable employed under the Acts) at the examining room, who says that this woman was "a notorious character; and when first brought to our (*i.e.*, the examining) room she had a

9087-9

poor little baby starving, a mass of bones, and both of them were covered with vermin." One fails to see how the nurse had the means of knowing that she was a "notorious character," and how the woman's wretched condition made her a prostitute.

17,096-101

(5.)—Louisa Collins had lived with one man for six years, and signed the voluntary submission, at the request of the police, under entire misapprehension.*

19,712

(6.)—A fisherman's wife at Folkestone, who came to the examining-room (*Qu.*, warned by the police to attend?), but "discharged upon her statement that she was innocent."

Magistrates'
Order

THE other mode by which a woman becomes subjected to the Acts is a magistrate's order.

Objections

To this mode the following objections present themselves:—

Jurisdiction

(1.)—The jurisdiction is summary, and can be exercised by a single justice of the peace. This is not a competent tribunal to

* This woman was brought before the magistrates of Southampton on a charge of refusal to be examined, and the writer may add some facts that he then ascertained. The woman's statement to her solicitor was that she had lived with a labourer, as his wife, for several years, had children by him, and had never been unfaithful to him in any way; on one occasion a man, who stated that he was an Inspector of Police, called at her cottage and said, "You know how you are living," to which she answered "Yes," thinking, as she explained, "that he meant I was not married to ———." Shortly after the Inspector called on her again, and said, "You are required to attend for examination at ———, next ———." She attended accordingly, when the Inspector offered her a paper, and told her to sign it; she did so, considering that the police had ordered her to attend for examination, and that this submission was a mere form following that order. She was examined several times; as the man who lived with her said, "I didn't like her going, but thought it was some new law or other." The man made some inquiry, and ordered her not to go any more. She was accordingly summoned before the magistrates for her neglect. At the hearing the Inspector of Police, in cross-examination, admitted the truth of her statement so far as it concerned himself. Asked whether he had any other proof of prostitution, he said only that he had seen her drinking with a man in a public-house on more than one occasion; and that he had seen her go in the evening into her cottage "with two different men." The man with whom she lived, who gave evidence before the magistrates, explained that he and she sometimes "had a glass or two of beer together" at the public-house mentioned, close to their cottage; and that the men with whom she went home were himself and a labourer, who rented a room in their cottage.

decide a charge where the decision is often so difficult, depending on a nice estimate of the credibility of witnesses and of the weight of presumptive evidence, and where the consequences of an adverse decision are so serious to an innocent woman.

In practice, we believe, except where the case comes before a stipendiary magistrate, more than one justice of the peace is usually present; but this security is not ensured by the Acts, and a case might be, and has been, heard and decided by a single member of the unpaid magistracy. Even where several magistrates are present, there is apt to be danger of partial justice amid the heated difference of opinion on the bench that proceedings under the Acts often evoke.

Information.
Act of 1866, s 15
19,566

(2.)—As a preliminary to the issue of a summons (the Act calls it a “notice”) an information is laid before a justice by a superintendent or inspector of police, charging that he has “good cause to believe” that the woman named is a “common prostitute.” The superintendent, in laying the information, even if he have any knowledge at all of the conduct of the woman justifying the assertion of good cause to believe her a prostitute, has that knowledge probably at third hand; the constable having reported to the inspector, and he to the superintendent.

10,268-71

19,713

0,166-8; 10,272

A point was made of the fact that the police, before summoning a woman, are obliged to apply for the authority of the Commissioner of Police in London. It appears, however, on the evidence of Captain Harris, that this application is merely formal, stating “not the facts of the case, but merely that such and such a woman refused to sign the voluntary submission to attend for examination:” and that the assent to this application is equally formal, without any knowledge or consideration of the circumstances.

13,496-505

Act of 1869,
Sched Form F

It is clear that the hardship is great if an innocent woman be summoned on a charge of this kind. It may be argued that so it is where a summons in a criminal case is wrongly granted. But a summons to answer a criminal charge is not granted as of course; the crime is defined, with strict rules of proof; and the informant acts at his own peril. Further, as has been before pointed out, the summons contains the alternative of appearing to answer the charge, or self-crimination.

The Hearing

(3.)—At the hearing, the Justice, in addition to the difficulty as to proof arising from the nature of the charge, and the absence of a definition of the offence, finds his duty loosely explained in the Act.

Evidence against
the accused
Act of 1866, s. 16

19,556-8,
19,676-82

The Justice may make an order on "oath being made before him substantiating the matter of the information," but Justices have differed in opinion as to the meaning of this, and though some have given to it "the reasonable interpretation that it is their duty to investigate the grounds of the superintendent's belief," others have held that the "matter of the information" is the declaration of the superintendent that he has good cause to believe that the woman is a common prostitute, and that therefore all that the Act requires is a *viva voce* repetition of the statement of the information.

204; 917; 920

The witnesses are nearly always the special police employed; not indifferent witnesses, since a conviction of the woman is essential to justify their conduct: the inspector's, on whose report the proceeding was instituted; and the constable's, by whose observation of the woman the inspector was informed. Mr. Acton states that in France proof of prostitution is required "by witnesses other than the informer or police agent," experience having doubtless shown how necessary is such a rule.

Acton on Prosti-
tution, p 1

19,558

Sometimes the hearing becomes a "party fight between the police, assisted by girls already subjected to the Acts," on the one side, and the woman charged, on the other; the additional witnesses thus called being moved by jealousy or other corrupt motives.

Defence

The accused woman has no notion as to the facts which the police intend to prove; proof of prostitution depending not on direct but on circumstantial evidence; and often consisting of various facts raising presumptions, strong or weak, of guilt, but capable of innocent explanation. If this explanation be not supplied, the accused is prejudiced; yet the absence of explanation is often due to want of notice of the facts to be produced, and to want of legal assistance or opportunity to obtain evidence to rebut the presumptions based on these facts.

Result of pro-
ceedings
6355; 17,047

See Append B. p.
794

19,558

17,051-8;
17,192-201

It is true that the proceedings before magistrates generally result in the conviction of the accused. The recent House of Commons' return, however, (July 27, 1871, No. 388) does not give accurately the relative numbers of convictions and acquittals; some cases in which there has been an acquittal (*e.g.*, one at Greenwich spoken to before the Commission) have been omitted. But even from that return it appears that at Southampton there were, in the year ending June 30th, 1871, four acquittals and twelve convictions. Now it stands to reason that the police will only proceed before the magistrates in what they consider their strongest cases, *i.e.*, cases in which the proof

is likely to stand the test of judicial inquiry, for defeat is a stigma on the police. Yet here it appears that one in three of the women, against whom the police were best prepared with proof, was found by the magistrates not to be a proper subject for the Acts. If the police make such a proportion of mistakes in the cases brought before the magistrates, what is the probable proportion of the mistakes in the cases where the voluntary submission has been obtained by the police? Further, many convictions occur from the accused's being taken by surprise by facts put in proof by the police, or, from want of legal assistance, being unable to produce evidence to support her defence.

inquiries under
the Acts are a
public scandal

It may be conveniently observed here that very various questions are left by these Acts for solution by a justice of the peace. Sometimes the inquiry before him may be who is a common prostitute, sometimes he may be hearing conflicting medical evidence as to what constitutes "freedom from contagious disease," sometimes he may have to decide whether a woman's objections to be examined with a speculum are justifiable, or whether a brothel keeper has "reasonable cause to believe" a prostitute to be "affected with a contagious disease." The interest of a certain section of the public in these edifying inquiries is manifested by the rush to the court that commonly takes place when these cases are to be heard. At Southampton, for example, it is a common sight on these occasions to see "twenty or thirty prostitutes in the room adjoining where the magistrates sit, and a great number of young boys looking at and talking to them." The inquiries, and such scenes, are hardly likely to aid the public morals.

17,120-3

But, say supporters of the Acts, the defendant may, if she choose, have a close court; and in fact no judicial inquiries under the Acts on the questions most often in dispute, viz., whether a woman is a common prostitute, whether she is properly detained in hospital, or whether she has refused to be examined, would ever take place but for opponents of the Acts who have assisted these women in obtaining them. Or again it may be said that practically the Acts could not be enforced if every woman registered must be first tried before a magistrate. These things are true. But are Acts in restraint of liberty defensible, where their working must be left entirely to irresponsible police action, and which cannot be enforced without scandal and depravation of public morality, unless the shame or the helplessness of the accused debar her from the protection of a public judicial inquiry?

The following cases illustrate some of the observations made above :—

Illustrative cases

19,588

1. Jane Featherstone was brought before the magistrates of Canterbury. The evidence of prostitution produced by the police was that she had been “seen in public-houses which were frequented by soldiers and prostitutes ;” that she had been seen “one evening sitting on a bench with a man” in a public promenade. The police admitted that she did not live in a brothel, and that they had never seen her in one. The magistrate said that it was not necessary to prove anything of that kind ; and trusting to the policeman’s belief based on the accused’s “general habits and manner,” made the order.

19,558

2. Eliza Kemp, a case before the Stipendiary Magistrate at Greenwich. A remarkable case ; the more so because this occurred in a district where the Inspector of Police is admitted to be a most careful and cautious officer. The evidence produced by the police was (1) that the accused had been seen to go with a man into a court (where there were several houses, none of which the police could say were brothels), and to remain there about a quarter of an hour ; (2) the evidence of four registered prostitutes, who said in cross-examination, “Well, we have to go and be examined ; why should not she go ?” (3) the evidence of a man who admitted that he owed the accused money, and that she had threatened to summon him for it ; (4) the fact, alleged by the police, that the accused was then suffering from venereal disease. Now, the result of the exertion of an experienced solicitor was that every fact on which the police depended was refuted or explained, and the summons was dismissed ; but this result was only obtained after an “extremely difficult and expensive fight, in which it was latterly a struggle whether this girl, emerging from prostitution into decent life, was to be stopped and thrust back again into the class of common prostitutes.” It will be clear on reading the details of this case that the accused could not have answered the facts proved against her without the legal assistance afforded her, and the remands, the cross-examination, and the evidence, of which she consequently had the benefit. If it be said that in a number of cases women charged under the Acts have had legal assistance provided for them, they have not been indebted to the Act, for this security.

19,551 ; 19,558

A CRITICAL SUMMARY
OF THE
EVIDENCE BEFORE THE ROYAL COMMISSION
UPON THE
CONTAGIOUS DISEASES ACTS,
1866—1869.

PREPARED FOR THE NATIONAL ASSOCIATION FOR THE REPEAL OF THE
CONTAGIOUS DISEASES ACTS,
BY DOUGLAS KINGSFORD, ESQ.,
OF THE MIDDLE TEMPLE,
LEGAL REPRESENTATIVE OF THE ASSOCIATION DURING THE SITTING OF THE
ROYAL COMMISSION.

COMPLETE IN SEVEN CHAPTERS.

Published separately, Price 4d., post free.

LONDON:
TWEEDIE AND CO., 337, STRAND, W.C.
F. C. BANKS, 50, GREAT MARLBOROUGH STREET, W.

NOTTINGHAM: PRINTED BY STEVENSON, BAILEY, AND SMITH, LISTER GATE.

THE NATIONAL ASSOCIATION
FOR THE
REPEAL OF THE CONTAGIOUS DISEASES ACTS.

Central Office :

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INTRODUCTION.

IN this work an attempt is made to marshal the voluminous evidence given before the Royal Commission on the Contagious Diseases Acts, with the view of exhibiting the practical operation of the Acts and of estimating their moral and physical results.

Various points are treated in the order that naturally suggested itself to the writer. The first step that the police, employed under the Acts, have to take is to discover the "common prostitutes" in the various districts to which the Acts apply. How they perform this task is considered in Chapter I. The next thing to be done is to subject common prostitutes to the operation of the Acts, either by voluntary submission or by magistrate's order. These processes are discussed in Chapter II.

The consequences of subjection to the Acts, viz., periodical examinations and detention in hospital if diseased, are considered in Chapters III. and IV., the latter of which also contains a comparison of the advantages of compulsory and voluntary hospitals.

In Chapters V. and VI. the effect of the Acts on venereal disease, and their alleged influence in improving public morality and decency, are respectively the subjects of discussion.

Chapter VII. treats the question of abuses under the Acts.

It will be seen that the evidence before the Commission is almost exclusively referred to, but the writer has occasionally, where it seemed to him necessary or convenient, added references to the evidence taken by the Committee on Venereal Disease and by the Parliamentary Committees on these Acts.

CHAPTER III.

PERIODICAL EXAMINATIONS.

- Registration** THE immediate result of subjection to the Acts is that the woman is registered in the police books as belonging to the class of "common prostitutes." As a registered member of this class, she is placed under police surveillance, and must report herself once a fortnight to the police inspector, and be passed by him to the examining-room for examination by the visiting surgeon.
- 1201
- Examining house** The examining-room is sometimes at the hospital certified under the Act, and sometimes at a house taken for the purpose.
- 670 In the district of Devonport, there are two examining-rooms, one on the other side of the way facing the entrance to the Royal Albert Hospital, and one in Flora-lane, Plymouth. Up to 1869, there was only one examining room, and women who resided in Plymouth then had to walk two miles and a half to be examined, which, "on a wet day, or on a cold winter's day," was a "good way for a woman to go," and "rather a hardship." The Flora-lane examining-room, though in a bye-street, is opposite to a number of cottages; and the examining room in Devonport has "a row of houses inhabited by poor labouring people close by."
- 8004
- 671-2; 8012
- 9050
- 7931
- 1,152-6; 12,296 At Portsmouth, the examining-room is "right away from where the girls live altogether;" "some women have to come four miles, and most of them a mile and a half, through the principal thoroughfares of the town;" and some have to come from Gosport, "across the sea, and sometimes, of course, in very rough weather." A factory at which many girls are employed, is "directly opposite the place of examination."
- 12,202
- 17,337 At Greenwich, the examining-house is in the middle of a bye-street, inhabited by poor but respectable people.
- 15,675-9 At Maidstone, it is exactly opposite to the gate of the Gaol, and there are "no houses of any size" near it; people who live in small houses are, the witness seems to suggest, insensible to nuisances.
- See 17,350
- 17,350 At Southampton it is in a conspicuous situation, and a protest against it as a nuisance was signed by the inhabitants of neighbouring houses.
- 14,438-41 At Aldershot, women have to walk about a mile to the ex-

13,915 amining room, and pass through the town and along the public road near the barracks. It was found necessary to order the soldiers not to hang about the examining room.

Nature and mode of examinations The nature and mode of the medical examination may be learnt from the evidence on the following points, premising that since the suggestion of Mr. Berkeley Hill does not appear to have been adopted, viz., that there should be a common code of instructions for the guidance of visiting surgeons in their duties, each witness can only speak of the practice which he has himself adopted.

Ho. Lds. Evce.,
290

The speculum

1248, 1393-1401
4109

The speculum is used in four out of five cases. Originally, by instructions from the Admiralty the use of the speculum was ordered, but these instructions have now been withdrawn, and the visiting surgeon is to "satisfy himself that women are properly examined."

1337; 1438-10
4630-2

4636-7

4633; 4638

1829

The specula used at Devonport by the present visiting surgeon are the two smaller sizes of Ferguson's glass specula. The kind of speculum used is left to the discretion of the visiting surgeon, and "different surgeons use different ones; it is merely a matter of practice and detail." The statement of women that they have been wounded by the examination, cannot be true of Ferguson's glass speculum, which is of thick glass and could not break. But some specula, the expanding one for instance, is very liable to cut in a rapid use of it, and, "if not judiciously managed, a rough introduction (of any kind of speculum) might create an abrasion of the parts."

1412

1832-3; 19,401-4

The speculum is disinfected and cleansed after each successive use of it. If not properly cleansed, disease is very likely to be communicated by the use of it.

1424-37; 13,842-6 The time occupied in each examination (including preparing for and the actual surgical examination) is about from three to five minutes on the average.

The chair

9037

1559; 9035-6
9038-9; 20,267.

The chair, as used at Devonport and Plymouth, is described by the nurse to be a "kind of reclining table with cushions beautifully fitted." A woman is not fastened to the chair in any way. There are simply foot-pieces, no straps. The straps were removed by order of the late visiting surgeon.

The nurse

1204; 4005, 13,492
4008
4004; 4007; 20,296

A nurse is always present at the surgical examination, "out of motives of delicacy, standing just behind the woman's head." Women sometimes object strongly to the presence of the nurse.

Menstruating women

1344; 1468; 4167-9
10,662, 20,297

The nurse examines women who say that they are suffering from menstruation, in order to ascertain the fact and whether they have symptoms of venereal disease. On the nurse's report,

- 4169-70 the women are, if necessary, sent to hospital for detention, under the provisions of sect. 3 of the Act of 1869. The visiting surgeon of Portsmouth, in addition to the nurse's report as to disease, takes the opinion of the police, and if they are "perfectly confident that they can rely on the information they have received," that the woman is diseased (how reliable such information is we have elsewhere pointed out), the woman is sent to hospital for detention under the above provision. The visiting surgeon considers that the Act justifies detention on "mere suspicion" of disease (the Act says "reasonable grounds for believing"); and we may mention here that Mr. Sloggett, Inspector General of Certified Hospitals, from his experience in that capacity and as visiting surgeon, recommends a removal of the above provision of the Act on the ground that it is harsh and inoperative: and he recommends in the place of it that a menstruating woman shall be obliged to "appear at the examining room from day to day until found to be in a fit state to be examined." This surely would not be less harsh than five days' detention in hospital, especially when it is considered that prostitutes, as a rule, menstruate for an unusually long period.
- 10,662
- 4171
- 4167
See too 13,744-5
- 4167; 13,745
- Pregnant women
- 694
- 1217; 1450-2
1462-3
- 20,336
- Women object to the examinations
- 317; 1208-12;
4370-1; 9008-11;
10,305
10,635
13,712
- Ho. Com. Evce.
426; 574; 822
- 13,483
- 17,865
- "Women advanced in pregnancy attend only once a month" at the examining room. At Devonport they are not instrumentally examined beyond the fourth month of pregnancy: after that time they are usually "referred to the nurse's examination;" but if "the police give the visiting surgeon information (of disease) against a pregnant woman," he examines her, but not with an instrument. In another district, a pregnant woman was examined with a speculum "up to within six or seven weeks of her confinement."
- There is a difference of opinion as to whether the women do or do not object to the periodical examinations. On the one hand, it is said by visiting surgeons and police that they "show no dislike," that they "submit to the examination perfectly quietly," "think nothing of it," that it is only "new comers," and they very seldom, who "show reluctance," or are "timid and nervous." But these things prove nothing. In the early times of the Acts there is clear evidence that the women resisted and objected to the examinations. But in the face of the punishment imposed by the Acts, most women soon learnt the hopelessness of resistance or objection. As the matron at one of the hospitals observes, they "never objected. They used to say they did not like it, but rather than go to prison they would submit to it."

17,965
18,681; 19,743

10,636; 10,726

10,727
17,390; 18,491

That many women soon get callous and indifferent to the examinations is but what one would expect as a result. It may be admitted, too, that some women regard the examination "from a very favourable point of view," looking on it as a means of obtaining treatment in hospital; others again look on the system of examinations as a source of profit to the prostitute, and as a convenience to her in her mode of life.

But that great numbers of women object very much to the examinations seems proved, if it need proof:—

8565; 16,883;
17,335

(1.) By their own statements.

(2.) By the fact that it was found necessary to give, by the Act of 1869, s. 6, the power of imprisoning with hard labour those refusing or neglecting to be examined.

10,222

Append. B. p.
780

(3.) By the fact that when periodical examinations were commenced at the various stations, great numbers of women "left the district" to avoid them. See Colonel Henderson's report, pp. 4 & 5, observing the relative numbers that "left the district," at Devonport in 1867 and 1868, and at Portsmouth in 1868 and 1869: *i.e.*, before and after the introduction of periodical examinations in those districts.

17,084; 17,092

Append. B. pp.
794-5

(4.) By the fact that a considerable number of women have preferred imprisonment with hard labour, in several instances enduring that punishment more than once, rather than submit themselves to examination. (House of Commons Return of Proceedings under the Contagious Acts, July 27, 1871.) In all, eighty sentences of imprisonment were inflicted, and though in a large proportion of cases magistrates offered the option of submission, of that offer the women sentenced seldom availed themselves.

1829; 4108-9; 8562
8568-70; 17,723;
19,405; 20,242-3;
20,291

(5.)—By the fact that the surgical examination is painful in many instances, pain arising from various causes.

19,747

(6.)—By the fact that on the statements of women to the police, "they are oftentimes obliged to get half drunk before they can come up and submit to the ordeal they have to pass through by the examination;" and there is much evidence in support of the statements thus made.

16,921; 19,945

Effect of the ex-
aminations on
the women.

Supporters of the Acts say that periodical examinations have benefited women subject to them in the following respects:—

4097; 11,632
13,748

(1.)—That the women are cleaner in dress and person, from a dislike to pass through the streets on their way to the examining room, or to present themselves for inspection by the surgeon, in a dirty condition. It is not suggested that this improvement

comes from increased self-respect, or rests on any other motive than that referred to.

(2.)—That the health of the women has improved. This assertion is dealt with later in considering the effect of the Acts on disease.

(3.)—That the women are improved morally, and that this is shown by the facts that their behaviour and language at the examining room are more decent, and that they are less addicted to drink.

Only one witness, however, viz., Dr. Barr, the visiting surgeon at Aldershot, attributes these effects directly to the periodical examinations, and he explains the influence for good to be the moral advice with which he commonly prefaces his surgical examinations. But Dr. Barr will be admitted, by those who have read the evidence given by him before the Committee of the House of Commons, to be an enthusiast on this point.

If the conduct of women at the waiting room has improved, this has arisen probably, not from any moral elevation, but from their experience having taught them the necessity of submission to the police.

Another witness, a clergyman, thinks that the examination “teaches modesty” to prostitutes and causes “a feeling of respectability to come over them which they have lost for years past.”

On the other hand, a number of witnesses speak to the hardening and degrading effect on the women of the whole system of periodical examinations.

A number of witnesses, it is true, deny this, but they do so on grounds which are obviously erroneous. They first assume that the mere surgical examination is the only or the main cause to which a demoralizing effect is attributed; and they then argue that this examination is but the same that many virtuous women are obliged to undergo, who are not said to be degraded thereby; and that it is absurd to suppose that a common prostitute, ready to sell her person to the first comer, will be degraded further by a medical examination conducted with every regard to decency.

As to the first argument, the examinations of a virtuous woman and of a prostitute are not identical. The purpose of the examination bears on its moral effect; the virtuous woman is examined in order to discover or treat her disease; the prostitute is examined because she is a prostitute, and in order to discover whether she is fit to practise prostitution, no disease,

3,752; 13,805;
508; 13,847-51

o Com Evce
592-8

15,669-70

3242; 3754-5
694-701; 7836;
633-4; 12,640;
945-8; 16,922;
17,316
965-77; 18,045-
18,056; 18,504;
1,184-6; 18,362;
19,743; 20,294
71; 1936-8; 7505
759; 10,740-4;
632; 13,491-5;
3,799; 15,669-70;
18,879-80

3785
11,633; 12,649

3756

3760

8563-4

unless it be contagious, being subject to the scrutiny of the visiting surgeon. It must be remembered that the proportion of prostitutes found diseased at each examination is small. Seventy or eighty are often examined in one day and none are found diseased. At Devonport, in 1870 there were 9,525 examinations of women free from disease. Many prostitutes are never found diseased. No virtuous woman is subjected to examination, fortnight after fortnight, till disease be discovered. Again, even granting that every possible regard is paid to decency by the visiting surgeon, yet the same regard to decency as would be given in private practice is not practicable where the examination must be conducted with considerable rapidity, and yet with a scrutiny which the purpose of a private examination seldom requires. The second argument is based on the assumed shamelessness of prostitutes. The worst of that class is taken as the type of all. The acts subject to examination, not the hardened and professional prostitute only, but women whom want, desertion, the wiles of brothel-keepers, or the compulsion of parents, have quite recently led into prostitution. To say that every prostitute is utterly lost to shame and incapable of further degradation is as gross a slander on human nature, as would be a similar assertion of a debauched man.

But there are a number of particulars in which examinations under the Acts differ from every other in their circumstances and in their moral bearing; and it is to these particulars rather than to the mere surgical inspection that a demoralizing effect is attributed.

(1.)—Periodical examinations involve police registration and surveillance, and thus create a marked class, branded as registered prostitutes, and deprived of various civil rights.

(2.)—The publicity attending periodical examinations. Women are conscious that they are by this means known as prostitutes by the officials employed under the Acts, by all the other subjected women of the district whom they meet at the examining-room, and by the public who observe them, on their way to the examining-room through the streets, in mid-day. Add to this the taunts and insults to which the women are exposed, as they are seen going to and from the place.

(3.)—The waiting-room at the examining-house, in which the women await their turn to be examined, their names having been entered by the police in the order of their arrival. The women have notice to come at any time between 11 and 2 o'clock. A number of women of every grade and class, the worst and best, are mingled together at the waiting-room, and

“scenes take place, not at all of a seemly character.” True that “young prostitutes on the first examination are requested to be there at 11 o’clock,” but one cannot see how this remedies the evil. Mr. Vernon Lushington, on paying a previously announced visit to one of the examining-rooms in Devonport, saw only “about 15 women sitting in the room, and they were perfectly orderly;” but this visit, in addition to being expected, was paid at a time, half-past 12, when the room would be unusually empty, for “the rush” at the examining-room is between one and two o’clock.

(4.)—Many women consider the Acts, and especially this system of registration and periodical examination, in exactly the same light as Dr. Balfour originally considered them, viz., as a “legislative recognition of prostitution as a branch of industry.” Of this view the undoubted fact that the women constantly call themselves, and in some hospitals they are called “Government” or “Queen’s women,” is an illustration. And, as we point out below, these examinations afford a direct incentive to fornication, and therefore are a source of profit to prostitutes and an inducement to prostitution. The State has, in effect, “gone out of its way to provide facilities for the practice of prostitution.”

The system of periodical examinations of prostitutes corrupts public morality :—

(1.)—The examining-house and its associations form a public scandal. Take for example the following facts :—

Women drive up in cabs and carriages.

Men attend or wait for the women.

A “stream of prostitutes” passes in mid-day through the principal streets of a town, when “prostitutes are paraded before the public,” and the “scenes in the streets on those days are not pleasant for respectable persons to witness.”

Children inquire about the examinations.

Children show a knowledge of the nature and purpose of the examinations; or play at “examination.”

Houses will not let in the neighbourhood of the examining-room.

“Uproarious scenes” at a public-house in the neighbourhood of the examining-room, “young civilians congregating with the soldiers” there on examining days.

Examining-house commonly called “—— Fair.”

Men and boys making “gibes and indecent observations” to women on their way to be examined; and respectable girls

"viewing these women and telling each other the object for which they were visiting the hospital."

17,849-51

Persons driving past the examining room and seeing thirty or forty women congregated, or crowding up, to be examined "thought the system "a proclamation of vice."

1940-1; 2095;

3251; 3442-4

12,869-72; 12,199

18,349; 18,388;

19,616; 20,210;

20,290-2; 20,276

(2.)—The system gives both an indirect and a direct encouragement to fornication.

Indirect, by teaching that fornication is necessary and venial.

Direct, by holding out a prospect of immunity from venereal disease. It seems absurd to assert that fear of disease is not deterrent, for it is to contradict a position which is the basis of all law. This assertion, too, is contradicted by the following facts:

12,626; 12,644-6

7833-5

12,623

13,915

19,749; 19,782-7

—Prostitutes are more visited by men on the days of examination, and in many instances men accompany prostitutes to or wait for them near the examining-room.

Act of 1869, Sched
Form J.

13,379; 17 315-29

17, 534-8;

18,333-42; 19,916

20,295-7

The evidence is conclusive that the notice-papers given by the visiting surgeon to the women on dismissal after examination, are commonly used by the women as certificates of health, and that they show them to, and are asked for them by, men. The significance of this practice is, not that these notices give any express license to prostitutes, but that the above use of them shows that the Acts give an incentive to fornication, and so encourage prostitution. This argument will not be touched by a withdrawal of these notice-papers, for they were only direct evidence of that which the whole system of the Acts professes to secure, viz., that prostitutes do not practise prostitution while in a state of disease.

Not efficient in
detecting 'Con-
tagious disease'

2980; 14,800

The Act of 1866 defines "contagious disease" as meaning "venereal disease, including gonorrhœa."

This definition is objectionable, for there are various forms of venereal disease which are not contagious.

3614-27

18,961; 19,500

But taking the purpose of the public examinations to be the detection in women of contagious venereal disease, the examinations constantly fail in their purpose; either from the difficulty in detecting disease at all, or from the difficulty in determining its contagious character. Thus there are various symptoms to which women are subject, closely resembling those of gonorrhœa, yet having no connection with it, where the difficulty is often extreme in determining with any degree of certainty whether the symptoms are those of venereal and contagious disease.

17,637-8

With regard to venereal sores, their existence is frequently hard to discover, and especially so when occurring in prostitutes.

6798-800;

17,638; 17,644;

Some witnesses state that it is impossible to decide that a sore

is syphilitic without testing its character by inoculating the patient; and other witnesses assert that syphilitic sores are not readily distinguished from perfectly innocent ulcerations. The existence, too, of constitutional or secondary syphilis of a contagious character is in a great number of instances not discoverable. It will be observed that the medical witnesses who speak doubtfully of the results of examination in ascertaining the existence or character of venereal disease, are gentlemen who have had large experience in the treatment of the diseases of women; while the witnesses who have no doubt whatever as to the efficacy of the examinations, are the visiting surgeons employed in conducting them.

The difficulties above stated are more likely to be experienced when the following facts are borne in mind. The examinations under the Acts have to be rapidly made; the women examined use various devices to prevent detection of disease from which they are suffering;—and the visiting surgeons under the Acts have been in many instances (at Devonport exclusively so) naval surgeons without any previous experience in the examination of women in order to detect venereal disease.

That the question whether a woman is affected with contagious venereal disease is one often of great difficulty, and on which surgeons will directly differ in opinion, is singularly proved by what took place at the Royal Albert Hospital, Devonport, in the years 1868 and 1869. The visiting surgeon sent into hospital a great number of women on the ground that they were so affected, but in whom the surgeons then in charge of the hospital were unable to discover any symptoms justifying their detention. The hospital surgeons (four in number) accordingly reported to the Admiralty that “numerous cases have been admitted to the hospital from time to time in which no symptoms of contagious diseases have been found present on their admission to hospital. Some of them have been purposely kept a few days without specific treatment, and still found after repeated examinations perfectly free from disease. These facts have been from time to time communicated to the visiting surgeon, and some of the cases he has been called in to examine for himself.” The positive contradiction of the visiting surgeon, who says, “I can state most absolutely and decidedly that no woman was ever sent into hospital without having on her person conclusive and absolute proofs of her being at that time affected with contagious venereal disease,” only makes this medical difference of opinion more glaring.

2732-1; 8405 In several other cases, women, ordered into hospital by the visiting surgeon, obtained certificates from civil surgeons that they were free from disease.

The ambiguous result of examinations creates this dilemma ; either the doubt must be given in favour of the woman's being left at liberty, in which case many women in a state to communicate disease will be at large ; or the doubt must be given against the woman, in which case many will be unjustly detained in hospital.

Often evaded

Further, the periodical examinations do not and cannot wholly prevent prostitutes from continuing prostitution while diseased if they choose to do so. Some, especially those who " continually suffer from disease," and who have the prospect of living the major part of their lives in hospital, go away to towns beyond the limits of the subjected district, and " continually communicate syphilis" in those towns. Others, " knowing they are diseased," fearing the discipline and detention in hospital, evade the police and " stop away week after week" from examination.

971-7; 2032;
10,218

1009

2451
4118-20; 14,630-2

Many, too, are infected with disease very shortly after examination (a thing more likely to occur since, as is pointed out elsewhere, each individual prostitute has intercourse with many more men than she did before the Acts), and so remain during the fortnight prior to the next examination, practising prostitution while in a state of disease. The consciousness of this defect induces one witness to propose that the examinations should be more frequent, and he considers that if " once a week they would be tolerably effectual."

2419-50; 2556-9

There are two practices of the police in connection with periodical examinations that may be noticed here ; one is an actual violation of the letter of the Act, the other is justified by the letter, but not by the purpose and intention of the statute.

Women sent directly from the examining room to hospital

By the Act of 1866, ss. 20, 21, where a woman is found on examination to be diseased, a certificate to that effect is given to her by the visiting surgeon, naming the certified hospital in which she is to be placed ; such woman " may, if she thinks fit, proceed to the certified hospital named," but if she " neglects or refuses to do so " the police may apprehend her and convey her to the hospital.

The Act clearly, therefore, gives the woman an opportunity of going to the hospital of her own accord, and it is only after that opportunity has been given, and the woman has refused or neglected to go, that the police have power to interfere. This, however, is another instance in which the right of the woman

under the Act is a thing inconvenient to the police; for where the woman fails to go to hospital, they have the trouble of finding, apprehending, and conveying her thither. The police accordingly adopt a procedure more convenient to themselves, though in direct contravention of the Act.

3,061-71

At Devonport, on the evidence of the late house-surgeon there, the "police are frequently in the habit of taking women from the visiting surgeon's room directly to the hospital without giving them an opportunity of 'refusing or neglecting' to go, and the women often complained bitterly of this. They were deprived of the opportunity of putting their houses straight before they were sent to hospital. There were frequently disturbances in the streets, for the women were taken sometimes by main force. They were not allowed to go first to their residences."

9,169-70

Inspector Anniss admits that this is the practice; he says, "in Devonport they are sent to the hospital, that is understood by the women. The hospital is on one side of the road and the examining room on the other. . . . They are given the certificate, the constable is at the door, and they are desired to go across the road. If a woman desired to go to her friends she would not be permitted. They are requested to go direct to the hospital and they do so. Force has been used on some occasions when women have refused." Anniss adds that at Plymouth (*i. e.*, from the Flora-lane examining room) the "women go by themselves" to hospital; that is to say, as appears from Mr. Woolcombe's evidence, the woman goes by herself, accompanied by, and practically in the custody of, a policeman, who walks "not exactly by her side, but somewhere near her."

8246

9,551; 19,910;
19,950-2

At Canterbury, women found to be diseased were not allowed to return to their houses, but were locked in a room, sometimes for several hours, and then sent off in custody to the lock hospital at Shorncliffe, 18 miles away. In one instance where a girl, living with her mother, was sent off to hospital under these circumstances, the mother "knew nothing about, and heard nothing of, her daughter, and was in great distress for seven days," before she found out where the girl was.

19 581

9,581; 20,299

A similar practice appears to have prevailed in all the districts under the Acts.

The hardship to the women of this illegal course is obvious; they are sent suddenly away to hospital, and often detained there for several months, with no opportunity of making

any arrangements for so prolonged an absence. Many of these women have children, for whose support, while the mother is in hospital, provision has to be made. Others, living in lodgings and having some few effects, find it necessary to make arrangements as to rent, quitting their lodgings, the care of their effects, and so forth, before going to hospital. Indeed, hardly a case can be supposed in which the inconvenience to a woman suddenly sent away would not be considerable. The hardship too is greater, when it is remembered that the hospital is often at a great distance from the woman's place of residence. Thus women are sent from Canterbury to the Shorncliffe hospital, from Southampton to Portsmouth, from Maidstone to Chatham, from Woolwich to London, and often from Aldershot, Chatham, Canterbury, Deal, Dover, Shorncliffe, &c., to the London lock hospital.

11,492

Punishment of
women, not pros-
titutes, for neg-
lecting to be ex-
amined.

Another practice of the police, though probably justified by the wording of the Act, is contrary to the purpose of the statute, and has worked very gross injustice. By the Act of 1866, s. 28, a woman subjected to the Acts is liable to imprisonment with hard labour if she neglects to attend the periodical examinations. The purpose of the Act is, of course, to ensure the examination of women while practising prostitution. The police, however, put this punishment in force against women, whether practising prostitution or not, during the whole period for which, whether by magistrate's order or voluntary submission, they are subjected to the Acts. A woman, therefore, who has ceased to be a prostitute, and has perhaps quitted the district, will be liable to punishment for failure to be examined, unless she get an order for relief from the visiting surgeon, or a magistrate, as the Acts point out.

8269

17,345

Now, as we have observed elsewhere, a woman wishing to reform is averse to making this formal application for relief, since it involves direct inquiry by the police and a certain amount of publicity. Probably the woman is seeking, or has obtained, employment, and is desirous of passing unobserved into decent life. In addition to the publicity caused by police inquiry, women who have actually made application for relief are compelled by the police still to be examined, and to bear the public shame that that ordeal causes, pending the result of the application.

If, however, with the view of avoiding publicity, a woman neglects to make formal application for relief, but simply ceases to lead a life of prostitution and discontinues attendance for

examination, she incurs a peril, which the following cases, taken as examples, illustrate:—

(1.)—A girl at Canterbury, who had just come out of gaol after a month's imprisonment for neglecting to be examined, showing every disposition to reform, was placed by a benevolent lady in the house of a respectable person to be taken care of till employment could be found for her. The girl was in strict charge of the people of the house, and her conduct was perfectly good. The police called repeatedly at the house, wanted to see her, and ordered her to go to examination. She did not go to examination, and consequently was summoned before the magistrates. Meanwhile she had left the neighbourhood, having obtained a situation, in which she is still living respectably. Had not the husband of the lady, interested in the girl, appeared before the magistrates and explained the circumstances, a sentence of imprisonment would certainly have been inflicted.

(2.)—Jane Featherstone, “having refused to sign a voluntary submission,” was subjected, on April 25th, 1870, to periodical examination by an order of the Canterbury magistrates (see the evidence on which this order was made, 19,558), and the police ordered her to attend for examination on April 29th. She at once left the district, and placed herself and children under the care of the Rescue Society in London. The Society shortly found for her a respectable situation in London; she remained in that situation for eight months, and then married. Meanwhile, for not having gone up for examination on April 29th, 1870, the Canterbury magistrates had, in her absence, sentenced her to seven days' imprisonment with hard labour, and a warrant for her commitment, dated May 2nd, was placed in the hands of the Canterbury police. In February, 1871, immediately after her marriage, Jane and her husband went to Canterbury to see the wife's children, then in an orphanage there. On Saturday night, February 4th, Jane, while walking with her husband in the streets of Canterbury, was apprehended by the police (to whom the husband in vain showed his marriage certificate), locked up till Monday, and then sent to Maidstone gaol, where she underwent the old sentence of seven days' imprisonment with hard labour. The grievance complained of is that this woman, who had for nine months at any rate led an honest life, should be taken from her husband and sent to gaol in February, 1871, for not having submitted her person to a surgical examination in April, 1870.

Now it is interesting to note the explanation on the report of

the police, whose conduct is complained of, that Captain Harris appears to think a sufficient answer to this case. He admits the facts to be substantially as stated. But he says:—1st. That “it was perfectly legal,” though “perhaps contrary to the spirit of the Act.” It is not contended that it was illegal, but the legality makes the case so much the worse for the Acts. 2ndly. That the warrant was executed, not by the special, but by the local police. What has this to do with it? The sentence under which the woman was imprisoned was passed for an offence created by the Acts, at the instance of the police employed under the Acts. 3rdly. That the woman “absconded” from the district. Now the dates must be noticed. From the date of the magistrate’s order (April 25th) to the date fixed by the police for her first examination (April 29th), there were just four days. It was impossible for the woman in that interval to get an order for relief, either from the visiting surgeon or the magistrates. She knew that she was not practising prostitution, but she had one of two courses; either to go to the examining room and face the ordeal that has been described elsewhere, or to leave the district. She chose the latter, and in order to avoid examination as a prostitute, she “absconded” to a refuge and honest employment. The course that Captain Harris would have prescribed for her would doubtless have been, that she should attend regularly for examination till she could satisfy the police that she was reformed, and then, with the permission of the police, a formal application by her for relief might have been successful. 4thly. That this woman was “an old common prostitute who had been a long time on the register,” and that after the magistrate’s order for her examination was made she “continued to follow her calling.” It is evident that these statements, which do not appear on the police report of the case produced by Captain Harris, were made by Captain Harris through inadvertence. They are disproved by the facts he himself admits, viz., that the woman was not registered till April 25th, and that she left the district immediately afterwards. Lastly. Captain Harris says, on the report of the police whose conduct is the subject of complaint, that the woman’s husband was very drunk when she was apprehended. We take it that this is introduced simply to prejudice the case, and that Captain Harris does not mean that the wife was properly imprisoned because walking with a husband who was drunk.

The whole so-called answer to this case is observable. It is an example of a too common method of answering cases of

alleged abuse under these Acts. The police evade altogether the gist of the complaint, and for "answer" state elaborately quite irrelevant facts.

(3.)--Susan White signed a voluntary submission for twelve months. Within that period she was placed in one of the homes of the Rescue Society, where her conduct was exceedingly good. She left the home and returned to her mother's at Dover, in order to be married, when she was apprehended by the police and sent to prison for fourteen days with hard labour, for not having attended for examination continuously in pursuance of the submission for twelve months that she had signed. As observed by Mr. Cooper, of the Rescue Society, who mentioned this case, the same thing might happen to most women admitted to homes, notwithstanding their entire reformation, should they at any time return to the districts in which they formerly lived.

17,460-4;
17,576-8

17,579





A CRITICAL SUMMARY

OF THE

EVIDENCE BEFORE THE ROYAL COMMISSION

UPON THE

CONTAGIOUS DISEASES ACTS,

1866—1869.

PREPARED FOR THE NATIONAL ASSOCIATION FOR THE REPEAL OF THE
'CONTAGIOUS DISEASES ACTS,

BY DOUGLAS KINGSFORD, ESQ.,

OF THE MIDDLE TEMPLE,

LEGAL REPRESENTATIVE OF THE ASSOCIATION DURING THE SITTING OF THE
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INTRODUCTION.

IN this work an attempt is made to marshal the voluminous evidence given before the Royal Commission on the Contagious Diseases Acts, with the view of exhibiting the practical operation of the Acts and of estimating their moral and physical results.

Various points are treated in the order that naturally suggested itself to the writer. The first step that the police, employed under the Acts, have to take is to discover the "common prostitutes" in the various districts to which the Acts apply. How they perform this task is considered in Chapter I. The next thing to be done is to subject common prostitutes to the operation of the Acts, either by voluntary submission or by magistrate's order. These processes are discussed in Chapter II.

The consequences of subjection to the Acts, viz., periodical examinations and detention in hospital if diseased, are considered in Chapters III. and IV., the latter of which also contains a comparison of the advantages of compulsory and voluntary hospitals.

In Chapters V. and VI. the effect of the Acts on venereal disease, and their alleged influence in improving public morality and decency, are respectively the subjects of discussion.

Chapter VII. treats the question of abuses under the Acts.

It will be seen that the evidence before the Commission is almost exclusively referred to, but the writer has occasionally, where it seemed to him necessary or convenient, added references to the evidence taken by the Committee on Venereal Disease and by the Parliamentary Committees on these Acts.

CHAPTER IV-

RELATIVE ADVANTAGES AND DISADVANTAGES OF COMPULSORY AND VOLUNTARY HOSPITALS.

Meaning of the
terms "Com-
pulsory," "Cer-
tified" and "Vol-
untary" Hos-
pitals.

A compulsory Hospital is one into which patients are compelled to go and in which they are compelled to remain till cured.

The certified hospitals under the Acts are compulsory hospitals, with the additional characteristics that they are provided at the expence of the State, are certified by the Admiralty or Secretary of State for War, and are for the treatment of a particular class of persons and disease, viz., prostitutes and contagious venereal disease in that class only.

On the other hand a voluntary hospital is one into which patients are admitted on their voluntary application, and in which they are not detained by any compulsion, other than by moral suasion and influence, or by voluntary compacts to remain till cured, made a condition of admittance.

The voluntary hospitals, which are proposed as substitutes for those provided under the Acts, would be either separate institutions, or what would be better, venereal wards attached to existing hospitals, in which all persons, male and female, suffering from any form of venereal disease might be treated.

It is not necessary to discuss here how funds to support these voluntary hospitals should be provided. There is no reason to doubt that the public would afford adequate support by voluntary contributions, if a proper appeal were made for that purpose. If government aid were found necessary, it would be more justifiable to give it for the general relief of venereal disease, than to give it, as is done under the Acts, for the exclusive relief of registered prostitutes.

We purpose to discuss *seriatim* the advantages or disadvantages asserted to attach to certified and compulsory hospitals, and to

18,159; 20,024;
20,097

Ho. Lds. Evce.
731-2, 1141-3;
1151

3190; 3739;
17,353; 19,243

consider whether these advantages would be possessed, and whether these disadvantages would be escaped by voluntary hospitals.

The advantages claimed then are these:—

Advantages
claimed for cer-
tified hospitals.

(1.)—That certified hospitals alone effectually strike at the source of venereal disease by the prevention of the practice of prostitution by diseased women; *i.e.*, by bringing diseased prostitutes into hospital in early stages of disease and by detaining them till cured. Objections that these hospitals reach only one of the sources of venereal disease, and only a portion of the prostitution practised by diseased women, are urged below in considering the disadvantages of such hospitals. But taking the advantage to be as claimed, we say that an equal or a greater advantage would be had by voluntary hospitals.

That this advantage is exclusively possessed by certified hospitals is based on two assumptions:—

14,541; 14,618-58

First: that, without coercion, prostitutes will not come into hospital till disease has reached such an advanced and painful stage as to make further prostitution impossible; and to prove this several facts are mentioned. (*a.*) When the Acts were first

4071, 10,592-3;
11,560-71; 13,684;
13,705

introduced many prostitutes were found in the various districts practising prostitution though badly diseased. But it must be remembered that prior to the Acts there was in these districts, with hardly an exception, no hospital accommodation whatever for prostitutes, except that cordial refuge, the workhouse, for those not only diseased but destitute. A “horror of going into the union,” so strong that prostitutes, “outcasts of brothels” because diseased, preferred to wander about the streets or sleep in the open air about the town, does not mean a disinclination to apply to a hospital for treatment. (*b.*) In voluntary hospitals, some

12,223

of those in London for example, prostitutes are found, whose disease was very bad before they were admitted. But this fact, used to show that these women would not have come in earlier if they had been permitted, proves the very opposite to that which it is cited to prove. The argument would be ludicrous from its inaccuracy, were not the real facts so sad from the amount of unhelped and helpless misery disclosed. For the number of beds in these hospitals is totally inadequate to meet the demand. As Mr. Lane, speaking of the London lock hospital, says, there are “about 30 beds for females on the voluntary side; they have been always filled and double the number or more could be filled readily; a great many applicants are dismissed for want of room every week,” consequently on admission days a number of

15,021; 4066-72

14,474-

14,479-80; 14,483 applications are made and the "worst cases are then selected for admission, being taken in according to the number of vacancies." Thus, the fact that women patients at these voluntary hospitals are badly diseased proves only the eager competition for admission, and the insufficiency of accommodation provided. Mr. Acton in his book "Prostitution" (p.247) puts it forcibly. He says:—The same necessity of selection which is imposed upon the house-surgeon by the restricted number of beds at his disposal works evil in another way. (He must) take as in-patients only those most malignant and complicated cases. . . Competition among cases is as it were invited, the premium of a bed is held out for successful severity, and it is no exaggeration to say that the invitation is responded to and the prize contended for by the unfortunate out-patients who find themselves from week to week 'not eligible through seniority,' 'not yet bad enough' to be taken into the house. The devices therefore to which they frequently resort in order to qualify are, first to throw away the hospital medicines, and then, reckless of consequences to society, to pursue the best known means of aggravating disease, viz., drunkenness, debauchery, and utter self-neglect."

(c.)—In the subjected districts many prostitutes do everything they can to avoid being sent into hospital, though knowing that they are diseased. But this fact merely exemplifies the disadvantage (pointed out in detail below) of hospitals, necessarily more or less on the footing of penal institutions, supplemented by police machinery for driving patients into them. A great majority of prostitutes will always hate, and avoid being driven into, such institutions.

Rep. Ven. Com.
2477

Ho. Lds. Evce.
187; 189; 385;
398; 536; 588-9;
617; 677; 728;
742; 854

8055-6

486-7

11,747-9;
12,934; 18,163

7079; 14,476;
14,517; 14,735;
17,311; 17,848;
20,137; 20,302

As opposed to the above facts, one has a mass of evidence given before the Venereal Commission and the Lords' Committee, tending to show that prostitutes are quite willing and generally most anxious to obtain medical treatment, and that they take much trouble and travel long distances in order to gain admission to hospitals. And before the Commission there is evidence that under the voluntary system at Devonport (tried from December 3rd, 1863, till March 31st, 1865) all the beds provided were kept full [Inspector Annis however, "from information received," contradicts those who might be supposed to know, on this point]; that voluntary hospitals in London, Bristol and Liverpool have proved an entire success; and that generally prostitutes when diseased are most anxious to obtain medical treatment. It is still objected, however, that there are many perverse or reckless prostitutes who would not

come into voluntary hospitals ; that there are many others who would not be aware that they were diseased till disease had made some progress ; and that slight forms of gonorrhœa would not secure admission as an in-patient into a voluntary hospital ; while, if treated as an out-patient, a prostitute would, either recklessly or from necessity, practice prostitution and spread disease. But these exceptional cases occur under a compulsory as well as under a voluntary system. Perverse and reckless women may evade examination under the Acts, and as we have shown in the last chapter, there are various other reasons why the system of periodical examinations does not prevent the practice of prostitution by diseased women.

Ho. Lds. Evce.

177
 Append. B. p. 778
 3281-2

Then, too, under the Acts there are by no means inconsiderable numbers of prostitutes who are discharged from hospital incurable or uncured, on whom the only check is the penalty imposed by sect. 31 of the Act of 1866, which provides that if a woman leave a certified hospital with a notice from the chief medical officer that she is still affected with disease, she shall be liable to imprisonment with hard labour for practising prostitution without having previously obtained a certificate from the visiting surgeon that she is free from disease. This provision appears never to have been enforced.

3093. And see
 Append. B. p. 791

2499

Most women would know that they were diseased within three or four days after becoming infected. With respect to prostitutes treated as out-patients spreading gonorrhœa, inasmuch as evidence (treated in detail in a subsequent chapter) shows that the compulsory treatment of the Acts has increased the amount of gonorrhœa, it would be as well to try whether a voluntary system would have a better effect. However, even if any disadvantage were proved against the voluntary system as not bringing diseased prostitutes under prompt treatment, we contend that this disadvantage would be far more than counterbalanced by the facts that voluntary hospitals would (as pointed out below) touch more widely the sources and consequences of disease, and do more for the alleviation of suffering.

One may observe further here that voluntary hospitals have not had a fair trial. In all hitherto provided the accommodation has been insufficient. In some admission has been hedged about by various restrictions or conditions, Governor's or other orders have been necessary, would-be patients have been compelled to provide themselves with certain necessaries, &c., &c., so that many prostitutes have been unable to comply with these preliminaries. While the few, established without any of these restrictions,

Ho. Lds. Evce.
 Append. D p. 150

17,353-5

to which the mere fact of disease gives admission, have not existed long enough for their advantages to be thoroughly known or appreciated.

Secondly: That, without a power of compulsory detention, prostitutes would not remain in the hospital till cured. To prove this there has been persistent reiteration of the general statements that a number of prostitutes leave voluntary hospitals, cured or uncured, when a fresh regiment or a fresh ship comes into the district, or any other unusual excitement occurs. These statements seem to be based on an often quoted passage in the evidence given by Dr. Deas to the Venereal Commission. But Dr. Deas is there speaking, not of voluntary hospitals, but of twelve beds at Portsmouth, provided under the Act of 1864, and filled by the compulsory process of that Act, detention being left to the discretion of the hospital authorities. Apart from the general statement of opinion on this point, we have two facts in support of the necessity for compulsory detention: viz., that under the voluntary system at Devonport, from Dec. 3rd, 1863 to March 31st, 1865, "forty-eight syphilitic patients and twenty cases of gonorrhœa were discharged uncured at their own request;" and that from the voluntary side of the London lock hospital, between 23 and 25 per cent. of the patients are self-discharged. But against the 68 who were discharged uncured are to be set 214 patients who remained in the Devonport hospital till their cure was complete, 114 of whom were syphilitic patients. There is no proof whatever, in either instance, that the women discharged uncured were prostitutes, or, if prostitutes, that they practised prostitution while in a state of disease. As we show below, a considerable proportion (30 per cent. in the London lock hospital) of the women treated in voluntary hospitals are not prostitutes, but married and other women who probably have children or are engaged in employments, making it necessary for them to leave hospital after a certain stay there. And of the prostitutes who left uncured, some may have done so with the intention of reforming, returning to their friends, going to refuges, continuing medical treatment at their own homes, &c., or at any rate without any purpose of continuing prostitution while diseased. No doubt it is a fact that a certain per-centage (say, making deductions above suggested, 8 or 10 per cent.) did return to prostitution, but this, in the face of the facts that a chief proportion of the patients were cured and that all were treated for some time, by no means proves that the voluntary system was useless or a failure, unless the only purpose of that

Rep. Ven. Com.
2545
See 2477; 2521

No. Com. Evce.
Append. 286

14,552

3350-9

4,481; 14,728-9

13,044; 13,080

4,526-8; 17,356
20,303

system be taken to be, not the cure of disease and relief of suffering, but the provision of clean prostitutes.

There seems no reason to doubt that by proper management the number of patients leaving uncured might be reduced to a minimum. It is not surely impossible, where the hospital is in a proper position and subject to proper regulations, to prevent the inmates from knowing of the arrival of regiments and ships, and of those other attractions which are said to affect them so much. A little tact in relieving the monotony of hospital, kindly influences and persuasion, and voluntary promises on admission to remain till cured, would all have their effect. At St. Bartholomew's hospital in London, there were, in the years 1868 and 1869 respectively, 350 and 373 women admitted to the venereal ward. The number self-discharged was 55 and 61, and of these a considerable proportion were married women, who returned to their families, while others went away to employment or returned to their friends. A small voluntary hospital was established by two benevolent ladies at Bristol a year ago. Sixty patients have been already treated, only two of whom left uncured, and one of these two had some reason for leaving. In a similar hospital at Liverpool, a promise, given on admission, to remain till cured, has been found effectual.

One may add as an argument from analogy, that, in homes and refuges, compulsion, other than that induced by kindness on one side and gratitude on the other, is not needed to detain these women, though the period of detention is considerable, the regulations often strict, and temptations to leave strong.

Further the alleged necessity of coercion in getting prostitutes into hospital and detaining them there rests very much on the assumption, altogether fallacious, that there is a general tendency among prostitutes to continue to practise prostitution while diseased. Now every motive of self-interest, operating on the brothel-keeper and the prostitute, is opposed to such a tendency. The truth seems to be that the tendency exists only in the poorest and lowest class of prostitutes, because compelled by want to continue their course of life; and that the tendency in this class, except in merely exceptional instances, is altogether removed when the provision of free and adequate hospital accommodation takes away the cause of that tendency. It is just this poor and wretched class, whose life has few attractions, which is most ready to go into and remain in hospital.

(2.)—That considerable numbers of prostitutes have been

reclaimed by the influences brought to bear upon them while in certified hospitals, and have been sent to their friends or to reformatory institutions.

Taking here only reclamations specifically attributed to the influence of hospitals (the alleged general reclamatory effect of the whole system of the Acts is considered later), we say :—First, that the number and permanence of these reclamations have been much exaggerated ; secondly, that they were the result of influences independent of the Acts ; thirdly, that more reclamations would be effected from voluntary hospitals. It will be convenient to take Devonport especially as an example, because the details given are more complete, and because the Devonport hospital is always asserted by supporters of the Acts to be the best specimen of a certified hospital.

At the Royal Albert Hospital, Devonport, under the compulsory system there were, between April 1st, 1865, and December 13th, 1869, 1348 women in hospital, of whom 317 are said to have been reclaimed, having been sent to reformatories or to their friends. Mr. Sedley Wolferstan, who was house-surgeon at the hospital during the above period, shows that of this 317 no less than 116 were “known to have returned to their former lives.” Other deductions have to be made for women “reclaimed more than once.” Women sent to reformatories are frequently remitted to hospital on a recurrence of disease ; and are again sent to the reformatory when apparently cured. Each such woman would appear in the hospital returns as two women reclaimed. Again women sent to friends or reformatories from hospital sometimes return to prostitution in the district, contract disease, come again to hospital, and are again sent to friends or reformatories. Each such woman represents as many reclamations as this process in her case may have been repeated. Mr. Wolferstan makes the necessary deductions for the above causes and shows that instead of 317 only 186 women can be considered a “possibly reclaimed ;” *i.e.*, having been sent to reformatories or to their homes ; they were simply not *known* to have reverted to prostitution.

Other witnesses are not satisfied as to the permanence of the reclamations effected from certified hospitals. Women have various motives for asking to be sent to their homes or to reformatories ; the idea that thus they will be more quickly discharged ; a wish to obtain the clothing supplied to them on such occasions ; a wish to evade the police by getting out of the district for a time ; a desire for a change and a free passage to their friends.

pend. C. Table
p. 824

2967-8

3146-64

235; 2035;
97-8; 5601-5
5955-6

17,840-1

849; 19,312

735 7483-7

20,283

The operation of such motives is almost peculiar to a compulsory system.

5764-7 The Rev. Mr. Everett, who voluntarily acted for a time as chaplain at the Royal Albert Hospital, thinks that perhaps half were permanently reclaimed, but adds that he knows of very few.

7333; 7471-83 The Rev. Mr. Hawker, for two years the paid chaplain at the same hospital, says that he succeeded in sending to friends or to reformatories about one woman a week on the average, but considers that a very small proportion were necessarily reformed, and it was his experience that a large per-centage returned to the district and to prostitution; on the whole, after two years' experience, he would say that only 10 per cent. of the women thus sent away were permanently reformed. Of the women over the age of 25 who were sent into homes not 5 per cent. remained there.

7495;
7433 Miss Bull, the head matron of the lock wards at the same hospital, says that of the whole number said to have been reclaimed, she does not think that more than ten could be proved permanently reclaimed, and that on the whole about 5 per cent. of those returned as reclaimed are so permanently. She thinks that the hospital influences do very little towards permanent reclamation.

7845-51 Miss Brown, matron at the Colchester lock hospital, out of 39 women sent to their friends and to homes, "thinks she may speak of 10 confidently who are going on well." She is "sure that the compulsory detention must be done away with," if the moral welfare of the women is to be considered.

17,807-10 Miss Cook, matron of a refuge at Chatham, has received women from the lock hospital, and finds that "these registered girls do not stay long, but go back to the streets;" 16 out of 26 received in one year did so.

7340; 7761-8;
7775-6 One peculiar obstructive to reclamations from these certified hospitals is this:—Many women, disposed to reform, are unwilling, or if with children unable, to go to reformatory institutions. What they want is to get honest employment, and "to earn something for themselves." It is impossible to get women employment directly from the hospital, because all women there are known to be, and are stamped as, prostitutes.

Ho. Lds. Evce.,
1141

Reclamations actually effected cannot be attributed to the Acts. The Acts contain no provision of any kind on this matter, except sect. 12 of the Act of 1866 requiring that "adequate provision shall be made for the moral and religious instruction of the women detained" in a certified hospital. This

7516-21

783; 7849;
8197-9

7975-6

provision consists in the appointment of a chaplain, who visits the women and holds services in the hospital. The Rev. Mr. Hawker, after considerable experience, was convinced that the advice and conversation of the chaplain were of small advantage to the women, "because of its compulsory character; they were bound to listen to it, simply because they were under restraint, whereas, if it were outside the hospital, it would be a voluntary act of their own." The appointment of a chaplain may be proper enough, but other machinery is needed for useful reclamatory work; *e. g.* suitable training for women who do not know how to work, employment for those who are fit for it, funds to maintain women in homes, to send women to their friends, to provide them with clothing, &c. The Acts do not provide for any of these things. At Devonport women are sent to homes and provided with clothes at the charge of the Samaritan Fund of the hospital. This fund was in existence and maintained by voluntary contributions before the Acts came into operation. A House of Commons Committee reported—(Ho. Com. Paper, April 20, 1866, No. 200)—on a reference to them of the bill of 1866,—“Your Committee have reason to believe that much good has resulted from the efforts of an Association formed at Devonport for the purpose of reclaiming persons placed in the Royal Albert Hospital of that town, towards which some pecuniary assistance has been furnished by the Admiralty,” and the Committee recommended Government to afford aid to similar associations. But the subsidizing of such associations by the Admiralty and the War Office does not justify these offices in attributing reclamatory work done by these Associations to the Contagious Diseases Acts.

Subsistence, training, and employment found for the women in homes to which they may be sent from hospital is at the expense of the patrons of those homes.

Sect. 27 of the Act of 1866, enacting that “every woman shall, on her discharge from hospital, be sent to the place of her *residence*, if she so desires, without expense to herself,” has regard merely to the case of women in hospitals at a considerable distance from the districts where they live, and from which they were sent to hospital.

The Contagious Diseases Acts do not empower the expenditure of a penny on the work of reclaiming fallen women, beyond the salary of a hospital chaplain to give them “moral and religious instruction.”

3-5; 20,064 It is at least obvious that no good influence which could be

3387; 3395;
7842-4
Append C. Tables
B. and C, p. 824

20,315

14,532; See too
17,831

23. 313-5

14,532

brought to bear in a compulsory hospital need be absent from a voluntary one; and that voluntary hospitals are more effectual in reclaiming the women admitted to them appears to be clear on the evidence. Mr. Wolferstan, who had experience under the voluntary system and under the Acts, shows that under the voluntary system the per-centage of reclamations was 28·9 as against 13·7 under the Acts. In 1870, out of 644 women admitted to the Devonport hospital under the Acts, only 43, or less than 7 per cent. were reclaimed. Further, the number of women reclaimed in each year was greater from the voluntary than from the compulsory hospital. Under the voluntary system (Dec. 3rd, 1863 to March 31st, 1865), 74 women were "possibly reclaimed," giving an average of 56 per annum. Under the compulsory system (April 1st, 1865 to Dec. 13th, 1869), 186 women were "possibly reclaimed," giving an average of 39 per annum. This is an answer to the assertion that the compulsory system is more effective, because it brings a larger number of women under the moral influence of the hospital. At the London Lock Hospital, where there is a voluntary and a "government" side, the experience is similar. Mr. Lane says: "A larger proportion of the voluntary women go (into homes) than of the compulsory, that is to say, the numbers are about equal, but there is a larger per-centage." As Mr. Lane furnished no statistics in support of his statement, we may give here a return made to Mr. Acton (see his book on "Prostitution" p. 264) by the authorities of the lock hospital. In 1867, out of 169 ordinary (*i. e.* voluntary) patients, 42 or 24·8 per cent.* entered the Asylum (a reformatory institution connected with the London hospital); while out of 708 government patients only 34, or 4·7 per cent. did so.

Mr. Lane shows, however, that in 1869 and 1870, though the numbers of "government" women in the lock hospital were less than in 1867 and 1868, the per-centage going into the Asylum increased from 4·7 and 6·5 to 10·83 and 9·91 respectively. He does not say whether the per-centage on the voluntary side increased in 1868-70. But, in any case, the per-centage on the government side still contrasts unfavourably with that on the voluntary side of the hospital.

* But it should be noted that 30 per cent. of the women on the voluntary side are not prostitutes (see 14,481; 14,728-9), and would not therefore be likely to go to a reformatory. It would appear then that out of 119 prostitutes on the voluntary side, about 33·5 per cent entered the Asylum.

22-3; 1980-1
4191; 10,527
14,566

(3.)—That under the influence and discipline of hospital, prostitutes, if not reclaimed, are yet improved in general conduct, and learn habits of cleanliness and order. To this effect are the general statements of certain witnesses.

If the alleged improvement in conduct amounts merely to a more complete submission to strict discipline, it has little moral significance. If, on the other hand, that improvement is attributable to the humanizing effect of kindly treatment, such improvement will be effected more readily in a voluntary than in a certified hospital. Kindness humanizes in proving sympathy and evoking gratitude. A prostitute compelled to enter and remain in a certified hospital is not likely to be convinced of the sympathy of others or conscious of gratitude to them. She knows that she is treated, not because she is sick and in order to relieve her own suffering, but because she is thought dangerous and in order to give security to other people.

pendix C. pp
826-8

But, beyond general statements of opinion, there is no proof whatever of any improvement in the conduct of prostitutes. Their behaviour in the streets is considered elsewhere. As to their behaviour while in hospital, the only detailed information is that afforded by a "register of offences committed by lock patients" in the Devonport hospital. This is a long list of punishments, by detention in "segregation wards" and by various terms of imprisonment, chiefly for "violent," "outrageous," "disorderly," and "indecent" conduct. During the continuance of the voluntary system at the same hospital, the conduct of the women was much better, on the evidence of the house-surgeon and the matron. The latter says "the girls are not nearly so well behaved they are less careful and less cleanly now than they were not nearly so obedient and contrast unfavourably with the women who came in when first I went (*i.e.*, at the time of the voluntary system) in point of conduct and cleanliness." Indeed a report of the hospital stated that under the voluntary system, not a single case of misconduct occurred.

3387-9
7621-9

7821

port of R. Alb.
hospital, 1864-5

79; 8247-8

One fact was given with some confidence by two witnesses, as showing that the women's conduct was improved by the discipline of a certified hospital, viz., that Mrs. Macdonald of the Exeter Penitentiary had said that the patients coming from the Devonport hospital were the best she received; but this was explained by Miss Bull, the matron at the hospital, who, as Mrs. Macdonald's friend and at her request, sent to Exeter the "very best girls," "a certain class" selected for the purpose. Mrs. Macdonald's direct statement, to Mr. Williams of the rescue

7872-4

20,359

8249-51

society, is that "the operation of the Acts has been most demoralizing; the women being quite unlike what they were before the Acts came into operation; and the chance of their reformation is very much on the decrease." Mr. Woolcombe, chairman of the committee of the Devonport hospital, admits that the conduct of the women has been worse, but attributes this to the opponents of the Acts by whose "strange stories," he says, the women have been "hardened" and "induced to claim their discharge from hospital," thus "creating some little trouble in the hospital." Mr. Woolcombe fixes July 1870, as the date when the evil influence of "the agitators" began to take effect. Before that date "we did not find these women made any difficulty at all, they were not hardened then." Mr. Woolcombe, however, does not explain how it was that (as appears from the table he produced) the number of cases of disorderly conduct in hospital were very many before, and very few after July, 1870.

Appendix C., p.
828

Objections to
Certified Hos-
pitals.

Objections to certified hospitals are many:—

19,999-20,001

20,028

20,028; 20,100-1

(1.)—Their purpose doubtless is the prevention of venereal disease, and, with that end, to detect and detain prostitutes, when in a state to communicate disease. The State provides machinery in order to ascertain whether prostitutes are fit to follow prostitution, and to submit them to treatment till they are so fit. If effectual, the operation of this is to afford "special facilities beforehand for practising illicit indulgences with a security which they would not otherwise enjoy." Venereal disease is the consequence of fornication and prostitution; these Acts, in attempting to remove the consequence, stimulate the cause. They "make arrangements beforehand which will enable the objectionable practices to be carried on without incurring the danger of the evil."

20,032

Voluntary hospitals would also be open to the objection that they in some measure stimulate vice, by relieving from the consequences of it. But voluntary hospitals rest on an entirely different principle. They treat venereal disease, whether contagious or non-contagious, in both sexes, in virtuous women as well as in prostitutes, with the general object of curing disease, but without any view to, or encouragement of, the vice that was the cause of it. There is a broad line between relieving from the consequences of vice and giving vice conditions more favourable to its continuance; between provision for the treatment of venereal disease and provision for the treatment of prostitutes.

3403; 3506-7;
357-60; 7579-80

4360

of 1866, ss
20, 22

See Chap. II.

(2.)—They treat only registered prostitutes. No other person affected with venereal disease can obtain admission. Mr. Sloggett indeed says, “if a woman (*i. e.* other than a registered prostitute) were to apply I am not at all prepared to admit that she could not enter, but no such application has ever been made.” But Mr. Sloggett must know that there is no authority in the Acts to justify the admission to hospital of any woman except such as are found diseased on examination by the visiting surgeon; that, if admitted, the expense of her treatment could not be charged on the Contagious Diseases Acts fund; and that there would be no power to detain her in hospital, unless a certificate from the visiting surgeon were given as the authority for such detention. The single exceptions in practice have been where women, formerly registered, have been sent back from homes with a recurrence of disease; but even these, as we have seen, have had to re-sign a voluntary submission, *i. e.*, again subject themselves to the Acts, before being re-admitted to the hospital.

The evil of this exclusive admission of registered prostitutes is double :—

13,044;
1,431; 14,728-9

First : The moral harm and the injustice of showing particular favour to prostitutes. The number of women, other than prostitutes, requiring treatment for venereal disease is considerable.

o. Lda. Evce.,
131

Thus we learn from Mr. Lane and Mr. Berkeley Hill that about 30 per cent. of the patients, who obtain treatment for venereal disease in the lock hospital of London, are not prostitutes but married women infected by their husbands, or girls infected by their seducers. Probably the proportion of women, not prostitutes, would be much greater at general hospitals with a department for venereal disease; because respectable women are deterred from going to lock hospitals, since they thus make known the nature of the disease from which they suffer. While, as Mr. Prescott Hewett observes, if they go “to any of the public hospitals, no one knows what they have been there for; they have merely been in St. George’s, or Guy’s, or St. Bartholomew’s Hospital,” as the case may be.

In addition to married women, there are other “innocent sufferers,” whose number in the opinion of some is not inconsiderable: viz., children affected with inherited venereal disease. Then again there are numbers of men, civilians, suffering from venereal disease, but unable from poverty or other causes to procure proper treatment. Now in these subjected districts, with hardly an exception, none of these classes of per-

sons have any means whatever of obtaining treatment except at their own expense, or, if destitute, in the workhouse. In Devonport, for example, the State has built an imposing hospital for the use of prostitutes, at a prime cost to the country for the building of upwards of £15,000. (This does not include the cost of the site, which was given by the War Office.) The State maintains this hospital at an annual cost to the country of nearly £4,000 for hospital charges only. But there is no provision whatever in Devonport for the treatment of other persons affected with venereal disease. What must be the lesson to the individual and the public of a system which refuses aid to an honest woman suffering from no fault of her own, but accords help readily to a diseased prostitute in a government institution and at the expense of the State?

Secondly: There is the objection from a physical point of view that by this exclusive admission of registered prostitutes, a very small portion of the sources of venereal disease is brought under treatment.

The Acts at an annual cost to the country of £40,000 provide compulsory hospital treatment for 2,700 registered prostitutes in eighteen military and naval stations. Common prostitutes in any but these subjected districts are not dealt with. If it be said that the Acts should be extended to the whole country, there must be borne in mind two things; the enormous expense to the country that such an extension of a compulsory system would involve, and the greatly increased difficulty in carrying out the Acts without abuse or mistake in towns (other than military or naval stations), where the public prostitute class is not a marked one, and where the number of private is much in excess of the number of public prostitutes.

Clandestine and private prostitutes are not only not brought under treatment by the Acts, but they are actually deterred in many instances, by fear of being subjected to the Acts, from applying to those practitioners to whom they have been accustomed to resort. This class is consequently peculiarly liable to contract aggravated, because neglected, forms of disease; and yet this is the class which is, for various reasons, more frequented by civilians than the registered prostitute class.

In these hospitals one sex only is treated. Soldiers and sailors can obtain treatment in their own hospitals. But the provision everywhere is most inadequate, and in most of the subjected districts there is no provision whatever, for the treatment of men suffering from venereal disease; and the want of means of treat-

Ho. Lds. Evce.,
507
Ho. Lds. Evce.,
502
7975-85; 8053

3280; 3508;
3512-3; 4353-9

Army and Navy
Estimates, 1870-1
Append. B. p 786

7167-76

6761; 6865
10,755; 20,223

ment causes not only the spread of disease, but also serious constitutional effects which prompt treatment would have avoided.

This compulsory system is argued to be justifiable when applied to habitual prostitutes, because they are especially liable to communicate disease. On the same argument then habitual fornicators ought to be subjected to this system. There can be no doubt of the extent to which disease is spread by habitual fornicators, whether soldiers, sailors, or civilians, and this fact alone has caused despair to many keen supporters of the Acts. It will be sufficient to refer to a great deal of evidence given on this point. Yet such tenderness has been shown to the habitual fornicator that, even in the army and navy, a regard for his feelings and objections has prevented or obstructed the revival of the system of periodical examinations in those services, in spite of repeated reports as to its necessity, and in spite of strong evidence that that system practically extirpated constitutional syphilis in regiments to which it was applied.

Certain arguments are used against the application of the Acts to fornicators. The Report of the Commission for instance says that "there is no comparison to be made between prostitutes and the men who consort with them. With the one sex the offence is committed as a matter of gain; with the other it is an irregular indulgence of a natural impulse." If this means that there is a moral distinction between the prostitute and the fornicator, it is unnecessary to discuss the point, for such a distinction is clearly irrelevant to the present question. If it means that the woman making a calling of prostitution is under an obligation to be in a fit condition for the practice of that calling, and that the State may fairly intervene to enforce this obligation, we fail to see why the man is not under an equal obligation to be free from disease, why the State should intervene to enforce this obligation on one side only, and why the State should intervene at all to enforce obligations supposed to arise out of illicit intercourse between the sexes. Then it is said that disease is more rapidly and extensively communicated by a prostitute than a fornicator; but it must be remembered that we are speaking only of habitual fornicators, and that a fornicator by infecting a prostitute creates a new source of disease.

The commonest argument, however, is that it is practically impossible to apply the Acts to men. If it be meant that habitual fornication cannot in any case be detected, it is absurd; if it be meant that proof would be inadequate, it is an argument that comes ill from a supporter of the Acts. For if

1577-8; 6407:
20,002; 20,051-3

See Chap 1.

frequenting brothels, associating with prostitutes, and frequenting places where prostitutes resort, solicitation in the streets, and being informed against for having communicated disease prove habitual prostitution, the same facts detected in the same manner should suffice to prove habitual fornication. The real practical difficulty is that men would not submit to the system, which is therefore applied only to the weak and friendless.

20,002; 20,050-3

Further, it is to be noted that when a prostitute infects a man, "the man must always be a consenting party to running the risk; but it is only a man who having been infected himself can communicate disease to an innocent person; and therefore if there is any argument for prevention, it should be applied to men as well as women."

Voluntary hospitals, on the other hand, would treat venereal disease among all classes, without distinction of character or sex, and would thus touch a far greater area of disease than any compulsory system can possibly do.

The Acts have been often defended on the ground that they are a saving to the country in preserving the efficiency of soldiers and sailors, and that they protect, not fornicators only, but "innocent sufferers" from venereal disease. On both these grounds voluntary hospitals have the advantage. For by affording a ready means of treatment, they would protect from the serious constitutional effects of neglected disease a great number of male civilians, whose productive labour thus saved, would be of more benefit to the country than would the full completion of that routine of drill and military exercise which constitutes the efficiency of a soldier or sailor. With respect to innocent sufferers, viz.: married women infected by their husbands, and children infected through their parents, it is only voluntary hospitals that would afford relief to the sufferers themselves, or prompt treatment to the persons from whom disease was directly derived. If it be true that constitutional and hereditary effects seldom follow syphilis unless treatment has been neglected, it seems especially important with a view to prevent these effects to supply means of prompt treatment to all who may be infected with this disease.

H. Com. Evce.,
1418; 1426

(3).—The certified and compulsory hospitals treat only venereal disease. Mr. Mill says, "If it were the opinion of Parliament that all sorts of infectious and contagious diseases are proper subjects for the Government to take in hand administratively, and to provide proper means for curing, there would be no objection to including this among the others." But there is an

20,025-7; 20,005

objection to the State's specially dealing with and singling out for particular favour venereal disease. Voluntary hospitals would on the other hand be merely an extension of the already existing hospital system; that system being at present chiefly defective in not relieving those suffering from venereal disease, this defect would be supplied. But in so doing no exceptional favour would be shown to venereal disease. It would receive treatment on the general principle that human suffering must be relieved, though incurred by the fault of the person so relieved.

(4.)—The compulsory detention of a woman in hospital on the ground that she is affected with "contagious disease" is not justifiable; for, as we have pointed out before, the character of the disease is frequently a matter of mere doubtful medical opinion. Here, again, the want of a proper definition of "contagious disease" in the Acts works injustice. To define "contagious disease" as meaning "venereal disease, including gonorrhœa," gives a wide discretion to the visiting surgeon, and he may take the view that he need not assure himself that the disease is contagious as well as venereal, before signing a certificate for detention in hospital. As we have already seen, it was the opinion of the house-surgeon and other surgeons in charge of the Devonport hospital, that large numbers of women were sent thither by the visiting surgeon who were not affected with disease of a contagious character.

Again, this want of a proper definition makes it almost impossible in many instances for women to obtain their discharge from hospital; for in order to be discharged they must have the certificate of the chief medical officer of the hospital that they are "free from contagious disease," or, if seeking discharge at the hands of a Justice of the Peace, evidence to that effect must be produced. Now in many cases, *e. g.* where a woman has had constitutional syphilis, it is impossible for a medical man to certify that she is free from venereal disease. Had the Act defined "contagious disease" as "venereal disease of an unquestionably contagious character," these objections would be partially removed, but even then there would frequently be the difficulty in determining the contagious character of disease, to which we have before adverted.

It must be remembered, too, that certain forms of disease, which are often mistaken for venereal disease, are incurable, and therefore there is every probability that a woman sent to hospital in consequence of such mistake, will be detained there for the full period of nine months allowed by the Acts.

It may be said that the Acts provide some security against a woman's being improperly committed to and detained in hospital, because if the chief medical officer at the hospital does not agree in opinion with the visiting surgeon, he will discharge the woman. Even this security, such as it is, in practice fails. For in some districts the chief medical officer is more or less under the control of the visiting surgeon, while in others the clear intention of the Act has been violated by uniting these offices in the same person.

By a regulation of the Devonport hospital the chief medical officer "may not discharge a woman from the hospital within ten days of her admission without the consent of the visiting surgeon;" and in the event of a difference of opinion between them, the "case is to be referred to the Inspector General of the Royal Naval Hospital, a naval surgeon who has no experience of the diseases of women."

If a woman appeal to a Justice in order to obtain her discharge from hospital, in addition to the medical difficulty, of which we spoke above, she is often embarrassed by not having proper means of getting independent medical opinion to support, or legal assistance to institute and conduct, such appeal.

(5.)—Residence in a certified hospital is demoralizing. Thus women who on entering the hospital have shown a real wish to reform, have, after a short association in hospital with more confirmed prostitutes, become altogether hardened. The police, we have seen, state that the fortnightly mingling of prostitutes for an hour or two at the waiting rooms does much harm to the better disposed among them. What then is likely to be the effect of the continuous association in hospital for many weeks or months of a considerable number of prostitutes, many of them the most shameless of their class? All the women detained there are *ipso facto* branded as public prostitutes, and motives to reticent and decent conduct are consequently absent.

Several witnesses, indeed, while admitting the demoralizing effect of certified hospitals, consider that it might be to a great extent obviated by making a classification of the women. But no one explains how such a classification could practically be effected. A classification by age would obviously not be effectual. Yet what other is practicable? At Devonport and Portsmouth those who come in for the first time are put in separate wards, but this evidently cannot be more than a very partial remedy of the evil. At other hospitals it does not appear that any classification is attempted. Possibly there has been despair of classing

according to any moral standard a number of women, all asserted to be public and habitual prostitutes, the disposition of whom cannot be known (at any rate in the case of those admitted for the first time) to the hospital authorities.

(6.)—These certified hospitals assume necessarily the character of penal institutions. Punishment by separate confinement in cells or “segregation wards,” or by imprisonment in gaol for misconduct, breaches of hospital regulations, &c., is found necessary in such hospitals. The result is that the hospitals are hated by many prostitutes, among whom there seems a balance of opinion as to whether they prefer gaol or hospital; the surgeon of the gaol saying that they liked being in gaol because they are “better and more kindly treated” there; while on the other hand the nurse, who attends at the Devonport waiting-room, says, “they have expressed themselves they would rather be in hospital than in prison. On coming out they say to me, ‘Nurse, I would rather be in the Royal than in prison.’”^{*} Women thus regarding hospital have, of course, every inducement, especially if diseased, to evade the police.

(7.)—Certified hospitals require the employment of a number of officials, viz.: the visiting surgeon and the superintendent, inspector and constables of police, in order to carry out the process by which women are compelled to enter hospital. The cost of these officials forms a considerable proportion of the expense of the Acts. This item of expense is altogether absent from voluntary hospitals.

^{*} From the short-hand notes of evidence. The answer is altered in the published report.





A CRITICAL SUMMARY
OF THE
EVIDENCE BEFORE THE ROYAL COMMISSION
UPON THE
CONTAGIOUS DISEASES ACTS,
1866—1869.

PREPARED FOR THE NATIONAL ASSOCIATION FOR THE REPEAL OF THE
CONTAGIOUS DISEASES ACTS,

BY DOUGLAS KINGSFORD, ESQ.,

OF THE MIDDLE TEMPLE,

LEGAL REPRESENTATIVE OF THE ASSOCIATION DURING THE SITTING OF THE
ROYAL COMMISSION.

COMPLETE IN SEVEN CHAPTERS.

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LONDON:

TWEEDIE AND CO., 337, STRAND, W.C.

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INTRODUCTION.

IN this work an attempt is made to marshal the voluminous evidence given before the Royal Commission on the Contagious Diseases Acts, with the view of exhibiting the practical operation of the Acts and of estimating their moral and physical results.

Various points are treated in the order that naturally suggested itself to the writer. The first step that the police, employed under the Acts, have to take is to discover the "common prostitutes" in the various districts to which the Acts apply. How they perform this task is considered in Chapter I. The next thing to be done is to subject common prostitutes to the operation of the Acts, either by voluntary submission or by magistrate's order. These processes are discussed in Chapter II.

The consequences of subjection to the Acts, viz., periodical examinations and detention in hospital if diseased, are considered in Chapters III. and IV., the latter of which also contains a comparison of the advantages of compulsory and voluntary hospitals.

In Chapters V. and VI. the effect of the Acts on venereal disease, and their alleged influence in improving public morality and decency, are respectively the subjects of discussion.

Chapter VII. treats the question of abuses under the Acts.

It will be seen that the evidence before the Commission is almost exclusively referred to, but the writer has occasionally, where it seemed to him necessary or convenient, added references to the evidence taken by the Committee on Venereal Disease and by the Parliamentary Committees on these Acts.

CHAPTER V.

EFFECT OF THE ACTS ON VENEREAL DISEASE.

IN this chapter we propose to consider what effect the Acts have had on venereal disease in registered prostitutes, and in the army and navy.

In favour of the assertion that the Acts have had a distinctly beneficial effect on the health of registered prostitutes, several facts are alleged:—

(1.)—That when the Acts are first applied to a district virulent cases of neglected syphilis are found among the registered prostitutes; “while after a district has been under the operation of the Acts for about six months, the character of the disease among the patients coming from that district is very materially altered for the better.” This improvement has been observed by Mr. Lane, the senior visiting surgeon of the London Lock Hospital, whose experience is valuable because he has had under his observation patients from several of the subjected districts. Syphilis necessarily assumed virulent forms before the Acts, because in most of the districts there was no, or insufficient, hospital accommodation for prostitutes, who had therefore no alternative to neglect. But the improvement above described cannot be claimed for the compulsory process of the Acts, unless it can be shown that adequate voluntary hospital accommodation would have failed to produce a similar improvement. So far from there being any evidence establishing this, it appears that a year’s trial of the voluntary system at Devonport (even with the disadvantage of a most insufficient provision of beds—38 as against 162 provided by the Acts) had produced this result, that in January, 1865, “a bad case of syphilis was very exceptional.”

(2.)—On taking the proportion of cases of disease to the number of examinations made among registered prostitutes, a most remarkable fall in the per-centage of disease appears. Thus at Devonport in 1867, on 378 examinations, 352 cases of disease were found; while in 1870, on 10,393 examinations, only 868 cases of disease were found. To these or similar

Registered
Prostitutes

1074; 10,592-3;
11,560-74;
13,684; 13,705

14,603

3186

5814 figures, Mr. Bulteel triumphantly appeals as showing a reduction in the per-centage of cases of disease to examinations from above 90 to about 8.

10,615-8 At Portsmouth, Mr. Parsons, the visiting surgeon, states that he found fewer cases of disease in proportion to the number of examinations in 1870 than in 1866. Turning to the police returns for the actual numbers, we find that in 1866 on 462 examinations there were 326 cases of disease; while in 1870 on 11,633 examinations there were 730 cases of disease. Taking all the subjected districts, the police returns put in by Captain Harris, similarly show a reduction of the "ratio of cases of disease per 100 examinations made" from 76·24 in 1865 to 8·19 in 1870.

Append B, p 780

Append B, p 779

Append B, p 797

Appendix C,
pp 833-4

It seems extraordinary that Mr. Bulteel, Mr. Parsons, and Captain Harris, who all knew the facts, should rely on these figures to show any improvement in the health of the women examined. For at Devonport and Portsmouth in 1867 and 1866 respectively, and at all the districts in 1865, examinations were made only of women *against whom the police had information that they were diseased*; while in 1870 there were periodical fortnightly examinations of *all* registered prostitutes. Similar tables, prepared by Mr. Lane, showing a large reduction in the per-centage of cases of disease to the number of examinations made between 1868 and 1870, are open to the same objection.

Append C, p 834

Append C, p 834

An objection may be made that these tables show a reduction after periodical examinations were introduced. This is explained by the fact that, as appears from the tables, the number of examinations in proportion to the number of women became more frequent; *e. g.* at Devonport in the first quarter of 1869, there were 1,946 examinations among 962 women, while in the first quarter of 1870, there were 2,750 examinations among 747 women. Of course, as Mr. Lane observes, "this mode of calculation does not afford a reliable criterion of the diminution of disease, unless the examinations are conducted with equal frequency in the several periods compared; otherwise frequent examinations will unduly diminish the ratio of disease, and exaggerate the apparent benefit."

Append C, p 834

(3.)—That the per-centage of cases of disease to the number of women examined has diminished. But the figures in Mr. Lane's table do not seem to prove the fact. At Devonport the periodical fortnightly examinations began in January, 1869; but, although the usual fluctuations according to the season of the year occurred, a whole year failed to produce any reduction

in the per-centage of disease. These per-centages are—

1869.	1870.
1st quarter 42·8	1st quarter 42·3
2nd ,, 47·7	2nd ,, 25·6
3rd ,, 42·2	3rd ,, 23·7
4th ,, 34·3	

1259-68

The reduction in the second and third quarters of 1870 was probably due to the change of visiting surgeon in this district at the beginning of the year, Mr. Pickthorn being substituted for Mr. Sloggett. We have seen that Mr. Sloggett sent into hospital a great number of cases that in the opinion of five other surgeons were not cases of contagious disease. It is likely that the apparent reduction was the consequence of this difference of practice. Or again, Mr. Pickthorn states that in 1870 from July, the number of women attending for examination “fell off for some weeks by nearly 100,” (*i. e.* per week, the number evading fortnightly examination being 170,) in consequence of agitation against the Acts that commenced at about that date. But this statement is not quite borne out by his own table; nor by the Police Returns, which show that 675 women attended for examination as against 727 in the previous quarter. Nor does it seem quite fair to attribute the falling off to agitation against the Acts; for on the Police Returns for 1869 it appears that there was as great a falling off in the corresponding quarter of that year, *viz.*: 765 as against 822 in the previous quarter. But taking the facts as stated by Mr. Pickthorn, we seem led to the conclusion that the result of a very irregular attendance on the part of a considerable number of the women, “170 of whom had not been examined for a long period,” was a much lower per-centage of disease among those under examination.

1267

At Portsmouth, too, the first quarter of 1870 shows an increase in the per-centage (27·2 against 26·3) over the same quarter of 1869; with, however, a reduced per-centage on the second and third quarters of 1870. At Chatham, where there were monthly examinations from 1866, and fortnightly from August, 1867, no reduction appears till 1870, when a remarkable fall takes place. At Aldershot the per-centage is considerably less in 1870 than in 1869.

pend B, p 834

Can then the reduction at these three stations be accounted for, except by the admission that the women are less frequently diseased? Now it is evident that these per-centages to be trust-worthy must be taken, not on the number of women on the register (according to Mr. Lane's plan), but on the number

of women attending for examination ; for, of course, the cases of disease are found among the examined, and the relative numbers of women on the register and of women attending for examination fluctuate at different times and at different stations.

Comparing then the numbers of women on the register, as given in Mr. Lane's table, with the numbers of women attending for examination, as furnished by the metropolitan police (see *Appendix B.* pp. 800-1), we find that the numbers do not correspond, and that the error accounts for the apparent reduction in the per-centage of disease at the stations referred to. The figures are :—

PORTSMOUTH.

	Number of Registered Women	Number of Women attending for examination
1869—1st quarter	807	684
2nd „	809	753
3rd „	844	799
4th „	823	780
1870—1st „	783	701
2nd „	793	674
3rd „	743	666

CHATHAM.

1869—1st quarter	270	304
2nd „	298	320
3rd „	286	306
4th „	323	310
1870—1st „	349	303
2nd „	417	296
3rd „	414	283

ALDERSHOT.

1869—1st quarter	311	326
2nd „	387	311
3rd „	388	305
4th „	366	268
1870—1st „	365	255
2nd „	432	314
3rd „	421	315

The numbers of the cases of disease slightly differ, but substantially agree.

If the per-centages at Portsmouth be calculated on the number of women attending examination, we find them to be—

1869.	1870.
2nd quarter 26·2	2nd quarter 27·3
3rd „ 26·2	3rd „ 23·4

So at Chatham and Aldershot, the apparently reduced per-centage of 1870, is accounted for by the numbers of women being

over-estimated in Mr. Lane's table; some reduction, however, would appear probable in 1870 as against 1869, because in 1869 periodical examinations were first established, or carried out with some approach to regularity, and therefore in that year the number of cases of disease would be swelled by cases of some standing brought under treatment, while afterwards the cases would be of disease contracted between successive examinations.

(4.)—That at the London lock hospital the women on the Government side contrast remarkably with those on the voluntary side. We have already noticed the obvious explanation of this. Mr. Lane says that the accommodation on the voluntary side being insufficient, they select the worst cases for admission; while on the Government side there are of course women suffering from disease in its slightest form, or in its earliest stage.

(5.)—That from a return obtained by inspector Anniss from the workhouses in the Devonport district, it appears that in 1862-4, 697 females were treated for venereal disease in these workhouses; in 1865-7, 218; in 1868-70, 115. The inference intended is that as these pauper patients were prostitutes, disease has very largely decreased. But during the first of these periods there was no provision (except an inadequate one during the last year) for prostitutes, whose only resource therefore was the workhouse; while in the second and third periods the Royal Albert hospital was providing gradually more complete accommodation. Another reason for there being fewer pauper prostitutes is furnished by Inspector Anniss himself, who says that the prostitutes before the Acts were starving, while since the Acts "their income has become rather too large," and they are "living in rather easy circumstances." The same fact will explain to Mr. Miller, a Portsmouth undertaker, why the number of prostitutes buried at the cost of the parish is less than it used to be before the Acts. Dr. Barr, who put in workhouse returns from the Farnham union similar to those put in by Inspector Anniss, as showing the useful working of the Acts by the "very remarkable decrease in the number of diseased pauper women, for 1869," explains on the face of his own table, and at length, why the table was valueless for the purpose for which he produced it. The enthusiasm, too, of Mr. Eggar and other guardians of the Farnham union in favour of the Acts, is thus very intelligible.

(6.)—Considerable effect was attributed by the visiting surgeon at Aldershot to his "custom of instructing women to keep themselves clean, to use injections and lotions, and to do all they can

4066-72

14,479-80;
14,483-4

9107-19

Append C. p. 818

Append. B. p. 796

961; 963; 1067;
1070

10,968-73

13,691-2

13,828-40

13,691

Append D. p. 839

13,910

14,713

towards keeping themselves and the soldiers free from disease." Similar instruction was given by the nurses of hospitals.

A suggestion has been made by Mr. Acton, as a necessary supplement to the Acts; viz., that prostitutes ought to be "instructed to have frequent recourse to ablutions and injections; and it might be useful to supply them on receiving their discharge from hospital with syringes and lotions, either free of expense, or at a price that would induce them to purchase these instruments and yet entail no loss on the Government, who should supply requisite lotions and instruments at cost price." (*Acton on Prostitution*, p. 192, 2nd edition.) We have no wish to discuss here the bearing of these practices, further than to say that it is hardly a function of Government to teach prostitutes the art of healthful prostitution.

2774; 3447; 3455;
6023; 13,908-11;
15,180-1

On the other hand, it is said:—

83; 962-3; 4258-9

(1.)—That the registered women are more frequently diseased now than they were, and that this is the necessary consequence where "each individual woman consorts with more men." It is admitted on both sides that each registered woman does consort with more men, either because registered prostitutes are more in request or because they are diminished in number. It is clear that each woman being frequented by more men is more liable to be infected, and that when infected she is a source of infection to more than she would otherwise be.

2819-25
Appnd. C. p. 819

3487-92

(2.)—That of the cases of disease occurring among the registered prostitutes, the per-centage of syphilis to that of gonorrhœa has increased in some districts. Thus at the Devonport hospital the per-centage of syphilis in 1870 was for the first quarter between 23 and 24, for the second quarter 37, for the third quarter 40, for the fourth quarter 42. In 1869, the per-centage was 25 and 17 respectively for the first and second six months of the year.

3490
Appnd. C. p. 829

It is true that even the high per-centage of 1870 is lower than that under the voluntary system, and than that under the Acts when first brought into operation in Devonport. But this is accounted for by the small number of beds provided under the voluntary system, which would naturally be set apart for the treatment of the most serious forms of disease; and the same would be likely while under the Acts only women, informed against as having communicated disease, were examined and sent into hospital.

14,504

Mr. Lane shows that of women sent to the lock hospital from Greenwich and Woolwich, the per-centage of syphilis in the first

quarter of 1870 was "for Greenwich 52·32, while for Woolwich, which had been under the Acts longer, the per-centage was 38·75." But this does not prove that the Acts reduce the per-centage of syphilis, for the proportion of syphilis may vary in the districts compared, in favour of Woolwich, independently of any influence of the Acts. Besides, as already pointed out, a higher proportion was to be expected in Greenwich immediately after hospital accommodation was provided (1870). Mr. Lane himself observes, "cases from new districts are of course more severe." Nor do the Acts appear to have materially reduced the per-centage of syphilis at Woolwich, where they were in operation from Nov., 1866, where monthly examinations were carried out from Aug., 1868, and fortnightly from May, 1869, since the percentage after this long trial was so high.

(3.)—That the Acts have not lessened the severity of disease among prostitutes, since the average number of days each prostitute is under treatment in hospital remains undiminished. The average stay of Government patients sent to the London lock hospital increased from 32·59 days in 1868, to 36·68 in 1869, and to 43·29 days in 1870. Mr. Lane, however, satisfactorily accounts for the "increase in 1870 from the fact that in the beginning of 1870, there were patients from half-a-dozen new districts, whose cases were, of course, more severe."

The Police Returns, on the other hand, represent a slight decrease in the "eight oldest districts" between 1868 and 1870. But that decrease seems fully accounted for by the fact that in 1868 the women were mostly those informed against as having communicated disease, a process which catches the worst cases, and that in 1869 on the commencement or fuller enforcement of periodical examination, there was a certain proportion of old and bad cases of disease; while in 1870 the cases were fresh, and, so to speak, current. The table giving the average time of treatment at the Devonport hospital for different periods is subject to similar explanation, or to that, suggested by Mr. Woolcombe, of a variance in medical opinion as to the character of disease and necessity for detention.

Now on these statements on either side we submit, that, (1) with regard to the health of registered women, the advantage of the compulsory system introduced by the Acts is not proved; (2) so far as the Acts have provided new hospital accommodation, and therefore means of medical treatment, good has been done. But hospital accommodation can be provided without Contagious Diseases Acts, and the onus lies on supporters of the Acts to

show clearly that the advantages they claim for them could not be obtained by other means less open to objection.

So far as the health of prostitutes is concerned, which, as affecting that of fornicators, these Acts design to improve, all that supporters of the Acts can assert is that a certain diminution has been effected in the per-centage of disease, without any approach to its eradication. Yet in several districts they have been partially applied for five or six years, and fully applied, with every power and condition essential to success, for two or three years. It is hard to see how, if the Acts are to succeed at all, they should not prove it on so long a trial. If the Acts keep prostitutes free from disease, how comes it that so large a number are found diseased at every examination; or that at Devonport, with every advantage, 471 out of 570 prostitutes came into hospital in 1870, and there were in that number 852 cases of disease? If it be said that they were infected by men, whence do the men contract disease? Nobody says that the Acts can stamp out venereal disease, and nobody explains why the minimum of disease is not yet reached. What condition of success, absent in 1870, will be present in 1871? If a very great improvement in the health of prostitutes, in these districts since 1864, were admitted, is there any proof that it is due specially to the compulsory process of the Acts, and not to the gradual provision from that year of hospital accommodation, where there was none before; or that it is not due to some extent to improved health and habits of soldiers and sailors, attributable to other causes?

2459-63

Append B p 795

Army and Navy In considering the effect of the Acts on venereal disease in the Army and Navy, let us first form a general estimate of the reduction of venereal disease in the services since the Acts came into operation; and, secondly, inquire whether this reduction was caused by the Acts. We are met at the outset by the difficulty of determining what evidence shall be selected for our purpose. In the evidence before the Commission and in the appendix to the Report, there are given various experiences as to the effect of the Acts, or of similar regulations, on the health of the men in particular ships and particular regiments; together with a number of tabular specimens of amateur and unauthorised statistics, or second-hand editions in another form of authorised returns. Leaving these untouched, we shall confine our inquiry mainly to three sets of authorised tables, viz.: (1) Metropolitan

pend B pp 788-92 police returns, which show the "number of soldiers, seamen, and marines admitted on the 'sick list' of military hospitals, ships in port, &c., for venereal diseases; the strength of the army and navy in garrison and port; and the per-centages of venereal disease existing among them;" (2) army returns, put in by Dr. Balfour, deputy inspector general and head of statistical branch, army medical department; and (3) navy returns, put in by Dr. Armstrong, director general of the navy medical department.

The police returns relate to the last three years only, 1868, 1869, and 1870. Returns similarly arranged formed part of Col. Henderson's report (No. 3, p. 10) and extended from 1865 to 1869. This part of Col. Henderson's report (dated April 22, 1870, and ordered by the House of Commons to be printed on August 8, 1870) has since been appealed to, in speeches, newspapers, and pamphlets, as a proof of the remarkable success of the Acts. It now appears that Captain Harris, (under whose direction the original report was prepared) discovered a few days before he gave evidence in March, 1871, before the Royal Commission, that this report is inaccurate. The error he attributes to the fact that "unfortunately the clerk who made it out, a very inefficient one, omitted in some cases disease not contracted in the district; in some cases he put it in, and in others he left it out." We cannot quite understand this explanation of the mistake, for the insertion or omission referred to would not appear to account for the error; but how serious is the discrepancy between the incorrect return in Col. Henderson's report and the corrected return now supplied may be estimated from the following specimens:—

				Per-centage of Venereal Disease in Army and Navy.	
				Col. Hend. Rep.	Corrected Return.
Devonport ...	1868	.....	8·69	.....	14·79
	1869	.....	9·47	.....	14·1
Sheerness ...	1868	.....	3·92	.....	11·59
	1869	.....	5·64	.....	17·48
Chatham ...	1868	.....	15·39	.....	26·3
	1869	.....	9·08	.....	16·76
Woolwich ...	1868	.....	9·63	.....	18·24
	1869	.....	6·71	.....	18·6
Aldershot ...	1868	.....	11·47	.....	20·70
	1869	.....	9·75	.....	18·85

Captain Harris does not say whether the mistake in Colonel Henderson's report extends to the returns for the years preceding 1868. If Colonel Henderson's report be accurate for the years 1866-7, and if the requisite corrections be made for 1868-9, it will

appear that at none of the stations was there any substantial diminution, and at some there was an increase of disease in the four years 1866-9; *e. g.*, the per-centages (adding that of 1870) will then read—

	1866		1867.		1868		1869		1870.
Portsmouth ...	22·93	...	20·1	...	23·61	...	19·75	...	17·59
Devonport ...	10·26	...	11·72	...	14·79	...	14·1	...	11·75
Sheerness ...	16·63	...	14·06	...	11·59	...	17·48	...	15·82
Chatham ...	16·90	...	20·72	...	26·03	...	16·76	...	20·38
Woolwich ...	27·26	...	18·64	...	18·24	...	18·6	...	16·1
Aldershot ...	—	...	22·8	...	20·7	...	18·85	...	18·45

13,395-6

If, however, the returns for 1866-7 be inaccurate, it would have been convenient that Captain Harris should have said so, and furnished the requisite corrections. Captain Harris is convinced that the returns for 1868-70 are correct, and to these, therefore, we will confine our comments.

The above table contains the per-centage on the whole amount of venereal disease in the army and navy in the respective districts. We have not classified cases of disease as contracted in the district or elsewhere, because this method introduces an obvious element of uncertainty into the returns, since the only means of ascertaining the source of disease is by the direct information (liable to great error) of the diseased man.

Append B p 814

Now it will be seen that at four of the stations in the above table there was a reduction between 1868 and 1870, varying from 2 to 6 per cent. At Chatham the per-centage fluctuated, decreasing in 1869 and increasing in 1870. At Sheerness there was a rise of 6 per cent. between 1868 and 1869, and a rise of 4 per cent. between 1868 and 1870. There is here an apparent discrepancy between the above and Dr. Balfour's return (commented on hereafter). The latter differs in form, giving the ratio of admissions per 1000 for primary venereal sores and gonorrhœa. But the result of it is that at Chatham and Sheerness (taken together) the ratio was 219 for 1868, 155 for 1869, and 152 for 1870; and at Woolwich it was 140 for 1868, 140 for 1869, and 141 for 1870; an estimate which materially differs from the police return as to these stations.

Append B p 788

The result of the police returns as to all the districts to which they refer is a total reduction of the per-centage of venereal disease from 20·15 in 1868, to 18·01 in 1869, and to 16·38 in 1870.

11 Dr. Balfour's
Returns
Append B pp
811-5

Take now Dr. Balfour's returns as to the state of venereal disease in the army. These returns are especially valuable

because prepared under the direction of a practised statistician, who having occupied his present official position for more than ten years has every means of information, and because we have some explanation of the sources whence the figures are derived, and the mode in which they are tabulated. It is, however, unfortunate that Dr. Balfour's present tables do not give details of the decline in venereal disease that occurred prior to 1864 in various districts afterwards brought under the Acts; because we are thus deprived of full information on a point most essential to a consideration of the question, whether a decline in venereal disease is due to the Acts or to other causes. We regret, too, that Dr. Balfour does not explain why he cannot give "minute details with perfect reliance on their accuracy" prior to 1864, and that he should have found it necessary to exclude from all his detailed tables returns of secondary syphilis, and to confine them to returns of primary venereal sores. Only a small proportion of primary venereal sores are true syphilis, or result in any constitutional effect. Thus Mr. Sloggett told the House of Commons Committee in 1869 that of "primary venereal sores under the present system two-thirds at least are not constitutional sores; not true syphilis, and therefore not followed by those effects upon the constitution which will affect the man himself or his wife and family; they are venereal but not syphilitic, and would not produce secondary symptoms."

Dr. Balfour, too, when before the same committee, did not contradict Dr. Brewer's statement that the proportion of true syphilis would be not more than one case in ten. Now clearly the important point in estimating the benefit of these Acts is, as Mr. Simon observes, "to fix one's attention on how the Acts prevent true syphilis, the syphilis which produces secondary symptoms;" for as Dr. Balfour himself admits, "checking disease which does not produce constitutional effects is not a point of very great importance." Dr. Balfour's reason for confining his returns to primary venereal sores and gonorrhœa, given to the House of Commons' Committee and repeated to the Commission, viz.: that these two diseases are most likely to be affected by the operation of the Acts" seems altogether insufficient; if the purpose of his tables be, not to favour the Acts, but to give the public the means of judging whether the Acts have done good and to what extent. We will now attempt to deal with the tables as they stand.

The first is Table A, "showing the admissions into hospital for primary venereal sores and gonorrhœa at 28 stations of

16,111

16,148

16,073

o. Com. Evce.
56; 175-8o. Com. Evce.
229; 1231o. Com. Evce.
304o. Com. Evce.
231-2o. Com. Evce.
124
16,073

pend B p 811

troops in the United Kingdom in each year from 1864 to 1870." The stations are divided into two classes, those not under and those under the Acts. The intention of this table is to show that at the stations not under the Acts there was no, or a fluctuating, decline in venereal disease, while at the stations under the Acts there was a steady and considerable decline. A correction should be made in this table in the ratio of venereal sores at the stations under the Acts for 1865, when Devonport and Portsmouth are erroneously given as the only subjected stations. Chatham and Sheerness were under the Acts from June, as Devonport was from April, in 1865. Including, therefore, Chatham and Sheerness, the average strength at the stations under the Acts in 1865 was 11,581; the admissions to hospital for venereal sores were 1,247; and the ratio per 1,000 was 107·6, instead of 120· as given in the table. With this important correction, the table shows that at the unsubjected stations the ratio per 1,000 of venereal sores was 108·6 in 1864, and 113·3 in 1870; of gonorrhœa, 112·5 in 1864, and 96·5 in 1870; at the subjected stations the ratio per 1,000 of venereal sores was 107·6 in 1865, and 54·6 in 1870; of gonorrhœa 140·5 in 1865, and 98·1 in 1870.

This table, however, is worthless to give any real indication of the effect of the Acts, for the conditions were perpetually changing by the transfer from year to year of stations from the unsubjected into the subjected class; the average strength on which the ratio is taken dwindling accordingly at the unsubjected stations from 60,681 in 1864 to 17,852 in 1870; while, on the other hand, the subjected stations were undergoing a converse process, the average strength rising from 11,581 in 1865, to 41,580 in 1870.

The next of Dr. Balfour's returns is Table B, showing the ratio per 1000 of mean strength admitted into hospital for primary venereal sores and gonorrhœa at certain groups of subjected stations, commencing with the year before the Acts came into operation at the respective stations, and ending with 1870. The result of the table is that there was in each group of stations a progressive decrease of disease. Windsor, however, which is taken singly, was a remarkable exception, inasmuch as, after monthly examinations of prostitutes under the Acts were commenced (in 1868), the ratio per 1,000 of venereal sores, that had been 57·7 in 1867, rose to 135·6, and in 1869 to 92·7; the ratio of gonorrhœa rising in the same period from 55·9 to 81·2.

Moreover, the apparently regular decrease in disease at Shorn-

Append B p 797

Append B p 812

Append B p 811
16,082-99

cliffe and Colchester is merely the result of these two stations being grouped together in this table; for as appears from another of Dr. Balfour's tables (Table D.) venereal disease fluctuated very much at these stations. At Shorncliffe, in 1870, the ratio per 1000 of venereal sore was 100, and very much higher than before the Acts were introduced.

The next table of Dr. Balfour's is Table D, "showing the ratio of admissions for primary venereal sores and gonorrhœa per 1,000 of mean strength at each of the principal stations of troops in the United Kingdom in each year from 1864 to 1870 inclusive." This table is prepared from the one (Table C) immediately preceding it, which gives the average strength and the actual number of admissions to hospital at each station. These two tables are the most valuable by far of those produced to the Commission, and they make one wish that Dr. Balfour, who had the means of doing so, did not carry them back for some years preceding 1864.

At Devonport the ratios between 1864 and 1870 are respectively 110, 133, 82, 76, 66, 74, 58, venereal sore. These figures appear to show:—(a) an advantage for 1864, when the voluntary system at the hospital was in force, over 1865, when for nine months women were examined if suspected of disease; (b) an advantage for 1866 over 1865, resulting in a remarkable fall from 133 to 82, which it is not easy to explain; for in 1866 the same process as that used in 1865 was followed, and, as appears from the Police Returns (Append. B. p. 800), was applied to about the same number of women; (c) a fall from 76 to 66 in the year 1868, when three-weekly examinations of prostitutes were adopted; and a rise from 66 to 74 in 1869, when fortnightly examinations were first enforced.

At Portsmouth there was on the whole a continuous and regular fall from 1864 to 1870, furnishing no evidence of an advantage for periodical examinations over the process under the Act of 1864 or *vice versâ*.

At Chatham and Sheerness (which might conveniently have been separated in the return) there was a steady fall in venereal sore till 1869, with a three-monthly examination at Sheerness during nearly the whole period, and a varying practice of examination at Chatham; and a slight rise in 1870, in which year fortnightly examinations were commenced at Sheerness, having been adopted at Chatham in the previous year.

At Aldershot there was a greater reduction in venereal sore (105 to 81) between 1864 and 1866 without the Acts than between 1867 and 1870 with them (81 to 67).

At Windsor the Acts were introduced in April, 1868, with
 Append. B. p. 797 a monthly examination; and there was a three-weekly examination from December, 1868, to December, 1869, and a fortnightly from December, 1869. The lowest ratio (58) of venereal sore at Windsor was in 1867, without the Acts; while this ratio went up to 136 in 1868, to 93 in 1869, and to 67 in 1870.

At Shorncliffe there were no Acts till 1868, but venereal sore declined rapidly, but steadily, from 1864 till 1867, the ratios being 82, 68, 57, 42. From July, 1868, till December, 1869,
 Append B. p. 797 there was a three-weekly examination, and the ratio was 77 and 60 in those years respectively. During the whole of 1870 there was a fortnightly examination, when the ratio was 100, or nearly 20 higher than it was in 1864.

At Colchester an extraordinary fall (182 to 85) occurred in 1869, during which year there was a monthly examination till June, a three-weekly from June to September, and a fortnightly from September to December.

At Winchester there was a great fall in 1870 on the introduction of the Acts, but the ratio even then was much higher than in 1866 and 1867, when there were no Acts.

At Dover a great leap down (from 80 to 30), and at Canterbury a great leap up (from 45 to 152) followed the introduction of the Acts in 1870.

At Maidstone there was a fall in 1870 from 128 to 68, while in 1864 the ratio, on almost the same average strength, was only 37.

The ratios of venereal sore only are considered above, because this is of most importance, and because the Acts, so far as gonorrhœa is concerned, are admitted to be a failure.

We do not comment on the returns in this table from other subjected districts, because we have no information as to the exact dates at which the Acts were introduced, or how they were worked in those districts.

From these facts we must conclude that, though this table shows on the whole a diminution of venereal sore, that diminution is not attributable to any particular process of the Acts, and might have occurred without them. It is remarkable that this table, which has no special arrangement of the details which it gives, points to conclusions so much less in favour of the Acts than the Police Returns or the previous tables of Dr. Balfour, which we have already examined.

III. Dr. Armstrong's Return
 Append B p 816 We now come to Dr. Armstrong's "Table, showing the number of cases of venereal disease contracted by the crews of

Her Majesty's ships at home ports from 1856 to 1869 inclusive, with the ratios for 1,000 of force."

This table is very meagre, and is brought down only to 1869, and since Dr. Armstrong has held his present office of Director-General to the Navy Medical Department, from 1868, he can have prepared the returns for 1868 and 1869 only. He ought, therefore, not only to have explained whence he obtained and how he prepared his own returns for 1868 (which he does not), but whence he obtained the returns preceding 1868. In judging the effect of these Acts, returns for 1868 and 1869 are of chief importance; but as these have been made under new direction, they may have been prepared in a different manner, and with a different classification, from those of the years before, in which case the returns of 1868 and 1869 are worthless in a comparison between the amount of venereal disease in those two years and the years preceding. It is admitted that in the Army Returns "a change was made in 1869 in the classification of venereal disease; and though every care was taken to include the same group of diseases as under the previous classification, yet the number for that year should be considered only as a close approximation." A uniform method, or full explanation where the method has been varied in the classification of returns, is not only important, but absolutely necessary. The very great discrepancies between Dr. Armstrong's table and the returns given in the "Statistical Reports of the Health of the Navy" preclude the supposition that these are the source from which the former is derived. Thus, on referring to the Health of Navy Report for 1868, we find in the Introductory Letter (p. v.), signed by Dr. Armstrong, this statement:—"Since the Contagious Diseases Acts came into operation, on the Home Station there has been a steady, progressive decrease in the ratio of cases of those diseases against which it is directed, from 104·2 per 1,000 in 1863 to 53· per 1,000 in 1868." The ratios here given differ, it will be seen, from those in Dr. Armstrong's table. Further, this statement, as appears on turning to the table given in the above Report (p. 366), refers to syphilis only, and ignores the fact that there was no decrease in gonorrhœa, the ratio remaining the same in 1868 that it was in 1863. Again (Health of Navy Report, 1868, p. 366), the above Report represents the ratios for 1867 and 1868 to be:—

	Syphilis.	Gonorrhœa.
1867	59.	22·2
1868	53.	32·4

In Dr. Armstrong's table the ratios given are :—

	Syphilis.	Gonorrhœa
1867	68·4	24·5
1868	55·4	34·7

The reduction of syphilis in the latter table, it will be seen, is far more considerable than in the former ; yet Dr. Armstrong affords no explanation as to the new mode of preparing the tables, by which a result, apparently so much more in favour of the Acts, is secured. So, on comparing the returns given in the Health of the Navy Reports with those given in Dr. Armstrong's table for a succession of years we get this result :—

See Appendix
C. p 824

Health of Navy Reports.		Dr. Armstrong's Table.			
	Syphilis.	Gonorrhœa.		Syphilis.	Gonorrhœa.
1860	76·8	20·3		94·6	29·
1861	100·4	29·6		114·4	34·8
1862	108·6	34·8		121·9	41·
1863	104·2	32·4		116·7	34·6
1864	96·6	25·7		112·7	28·4
1865	97·1	30·3		108·7	34·4
1866	69·1	20·4		76·3	25·
1867	59·	22·2		68·4	24·5
1868	53·	32·4		55·4	34·7
1869	—	—		59·5	42·4

Here, again, Dr. Armstrong's table represents the amount of syphilis in 1861-4 (the years immediately preceding the Acts) to be much higher in comparison with 1868 than does the official table. Compare also, particularly, the fall in syphilis in 1865 according to the one (from 112·7 to 108·7), and the rise (from 96·6 to 97·1) according to the other, besides other contradictions. Dr. Armstrong seems originally to have given in a table corresponding to that compiled from the Health of Navy Reports, for in his examination he gives similar ratios. Why, then, has the table printed in the Appendix (B. p. 816) been substituted without a word of explanation from anybody ? We cannot too strongly condemn the course taken in this matter ; for although Dr. Armstrong, when before the Commission, promised to supply additional and earlier returns than those in the first table he produced, he never stated that the two would materially differ in the ratios given, and be compiled on different principles. Had he done so he would have been examined upon the second table, which is so much more favourable to the Acts. As it is, he has put in one table upon which he has been examined, and on the essentially different one there has been no examination at all.

16,576-8 ;
16,705-8

16,511-5; 16,532-4

Taking Dr. Armstrong's table, however, for what it is worth, there are several points in it deserving remark. The ratio of syphilis for 1862 is exceptionally high, the ratio having been gradually rising from 1858, when it was 80·3. But in 1862 the turning point seems to have been reached, and a gradual decline began. Between 1864 and 1865 syphilis fell from 112·7 to 108·7, while gonorrhœa rose from 28·4 to 34·4. Between 1865 and 1866 syphilis fell from 108·7 to 76·3, and gonorrhœa from 34·4 to 25. Disease, therefore, was practically stationary between 1864 and 1865, but fell suddenly and most remarkably between 1865 and 1866. The Acts were applied in 1865 to four ports, viz., Portsmouth, Devonport, Sheerness, and Chatham; and if the fall in disease in 1866 were attributable to the Acts, we ought to find that they were applied in 1866 far more completely than in 1865.

It will be enough to take Portsmouth and Devonport in detail as examples, because the chief naval force is at those two stations, *e.g.*, at Portsmouth and Devonport there would be about 18,000 seamen and marines, while at Sheerness and Chatham there would be only about 3,000. Now, at Portsmouth the Acts were first applied in December, 1864, in which month 18 cases were sent into hospital; and more was done in 1865, when out of 515 examinations 368 cases of disease were sent into hospital, for the seclusion of diseased prostitutes, than was done in 1866, when there were 462 examinations and 326 cases sent into hospital. At Devonport the Acts were applied in April, 1865, and between April and December of that year 202 cases were sent into hospital. In addition probably about 70 or 80 (see Append. C., p. 829) cases of disease were treated under the voluntary system from Jan. 1st to March 31st, 1865, so that about 300 cases in all of disease among prostitutes were treated at Devonport in 1865. In 1866 the number of cases treated was 345, an increase of only a fifth on the number treated in 1865.

We arrive therefore at this conclusion, that in 1865 when the Acts (under the process of that of 1864) were brought into operation at Portsmouth and Devonport, no advantage as to venereal disease, over 1864 when there were no Acts, occurred; and in 1866, when the Acts had no more operation than in 1865, a very great fall in both classes of venereal disease occurred. Some cause therefore other than the Acts must be found to explain the effects produced.

Periodical examinations of prostitutes every three weeks were commenced at Portsmouth in January, 1869; at Devonport

Append. B. p. 789

Append. B. p. 780

Append B, p. 797

fortnightly examinations were carried on throughout 1869. Under this complete process of the Acts surely disease ought to have diminished. Nevertheless we find from Dr. Armstrong's table that the ratio of syphilis increased from 55·4 to 59·5, and gonorrhœa from 34·7 to 42·4, in 1869. The only other evidence produced by Dr. Armstrong to show the advantages of the Acts, was his statement that in particuilar ships there was a diminution of venereal disease since 1863. With this statement, as no particulars from year to year are given, it is impossible to deal. But it is evident that no inference can be drawn, as indeed Dr. Armstrong seems to admit, from the state of venereal disease in particular ships at different periods, in consequence of the varying conditions under which they are placed. Thus the "Duke of Wellington" and the "Asia," both "stationary ships" at Portsmouth, show results entirely different; and while the "Duke of Wellington" is instanced to show the success of the Acts, the surgeon of the "Asia" reports that with respect to venereal disease on board that ship the Acts have proved a failure. (Health of Navy Report, 1868, p. 24.) Dr. Armstrong explains the failure in the case of the "Asia" by suggesting that the provisions of the Acts were not properly carried out at Portsmouth; but he does not show how the Acts were more successful in the case of the "Duke of Wellington" in spite of their imperfect administration. It is evident that the state of venereal disease is influenced more by the peculiar circumstances of each ship than by the Acts; *e.g.* in the "Indus" and "Royal Adelaide," stationed at Devonport, while the ratio per 1000 of syphilis in the former ship was 58 in 1863, and 53 in 1868, in the latter ship the ratio was 200 in 1863 and 14·5 in 1868; and the ratio of syphilis that increased, between 1867 and 1868, in the "Indus" from 36·1 to 53·3, decreased in the "Royal Adelaide" in the same period from 30·3 to 14·5. It is noticeable, too, that Dr. Armstrong, who was confident that any decrease in disease was the consequence of the "operation of the Contagious Diseases Acts solely," and "most undoubtedly" due to the periodical examinations of prostitutes, showed himself entirely ignorant of the dates at which the Acts were introduced, and periodical examinations carried out, in the different ports to which his returns referred. Dr. Armstrong seemed to think that the process of the Act of 1864 and the process of the Act of 1866 were carried out from the respective dates of the Acts, which as we have seen was very far from the truth.

Among the witnesses who are sure that since the Acts the

16,586

16,582; 16,656;
16,731

4170; 16,580

16,580-2; 16,731

16,737-48

16,586; 16,649-52
16,749-50

16,576-7

16,634; 16,638

16,639-47;
16,721-3

Append. B.p. 897

Effect of the Acts
on Gonorrhœa

amount of syphilis, or at least primary venereal sore, has diminished, there is some difference of opinion as to whether there has been a diminution in the amount of gonorrhœa, Dr. Balfour's general opinion is that with respect to the army "the Acts appear not to have produced an impression on gonorrhœa, because the reduction in gonorrhœa has been equal at the stations where the Act was not in operation and where it was; and therefore we are entitled to say that there has been no result produced on gonorrhœa by the operation of the Acts." This failure Dr. Balfour attributes to the "extreme difficulty, if the woman is desirous of concealment," of detecting disease, as well as of determining whether the appearances are really morbid or only natural.

In the navy, gonorrhœa is admitted to have increased on the returns, the ratio being higher for 1869 than it has ever been for fourteen years past, but Dr. Armstrong attributes this to the fact that they are "so anxious now to find out every case of disease, that cases which passed without observation before are now put on the list, however trifling they may be, and that appears to me to account for the fluctuations in gonorrhœa." Though this may account for a sudden rise immediately after the application of greater scrutiny, it does not account for the apparently continuous rise during three years of a gradually more stringent enforcement of the Acts; whilst increased care ought to have prevented the spread of disease, and so have quickly diminished the ratio again.

Some witnesses express an opinion that gonorrhœa should be excluded from the operation of the Acts, which we have seen do not affect its amount. Dr. Balfour says that "if the question were as to gonorrhœa, it is not a thing which would justify any expense or the infliction of anything that might be called a hardship, because the consequences of gonorrhœa are generally local," apparently agreeing with the medical officer to the Privy Council that "gonorrhœa is never even temporarily of much importance to women, nor ever, unless very exceptionally, of much permanent importance even to men." On the other hand Mr. Lane and Mr. Berkeley Hill consider that gonorrhœa in men is a serious disease having grave complications, and in by no means exceptional instances important constitutional effects.

Assuming, however, that there has been a considerable reduction of venereal disease generally in the army and navy since the Acts came into operation, we have to inquire whether the Acts were the cause of this reduction, or whether it is not to be attributed to other independent causes.

16,099; 16,256;
16,440

16,100-5
16,341-2

3463; 14 886;
16,602
Append. B p 916
Append. C p 824

16,602

1809; 2076-7

6,145; 16,259;
16 367

Public Health.
11th. Rep. p 14

4,677-82; 14,818

Decrease of Dis-
ease from other
Causes.

That some such causes existed and were producing an effect in reducing venereal disease appears conclusively proved from the fact that in the army there was a greater diminution of venereal disease for a number of years preceding the Acts, than has occurred in a similar number of years since the Acts came into operation. This is shown especially by the two following tables.

Ho Com Evce,
p 88

The first is one produced by Dr. Balfour to the House of Commons Committee, showing the "admissions into hospital per 1000 of mean strength for venereal diseases" at various stations for the nine years 1860-8. This table, so far as it relates to the stations to which the Acts have been longest and most completely applied, is as follows :—

STATIONS.	1860	1861	1862	1863	1864	1865	1866	1867	1868	Dates at which the Acts were first applied.
Devonport and Plymouth ...	410 ...	470 ...	367 ...	351 ...	289 ...	360 ...	317 ...	312 ...	280...	April, 1865
Portsmouth	503 ...	455 ...	407 ...	349 ...	337 ...	329 ...	359 ...	378 ...	348...	Dec., 1864
Chatham and Sheerness ...	351 ...	328 ...	313 ...	322 ...	313 ...	292 ...	326 ...	277 ...	275...	June, 1865
Shorncliffe	327 ...	325 ...	233 ...	248 ...	249 ...	233 ...	219 ...	215 ...	297...	July, 1868
Woolwich	473 ...	399 ...	371 ...	292 ...	220 ...	204 ...	219 ...	255 ...	191...	Nov., 1866
Aldershot	339 ...	361 ...	349 ...	303 ...	321 ...	302 ...	233 ...	261 ...	237...	April, 1867
	2433	2368	2010	1865	1729	1720	1673	1698	1628	

In the margin to the table we have given the dates at which the Acts were first applied from the Police Returns furnished to the Royal Commission, the dates as given in the original table being incorrect.

Append B p 797

Taking first all the stations together and adding the ratios together, we find that the decline of venereal disease in the five years 1860-4 without the Acts, was not only steady and regular, but far more rapid than in the five years 1864-8, when the Acts had been applied for a longer or shorter period to the whole of these stations. Dr. Balfour, however, to whom the significance of his own table, in showing the fallacy of claiming for the Acts all the reduction in venereal disease that may have taken place, never seems to have occurred, objects to the addition of ratios, calculated on "forces different in amount at the different stations, and therefore ratios of unequal quantities." Still, this method gives roughly the relative proportions of venereal disease at the stations taken together, from year to year; and sufficiently establishes the fact (in Dr. Balfour's own words as to this table), that "generally prior to the introduction of the Acts, there had been at all the stations a proportionate decrease in the amount of this class of diseases."

16,286-90;
16,300-13

16,312-4

Ho Com Evce
1124

If however we take single stations, and thus obviate the above objection, the result is still more remarkable. At Devonport, the ratio between 1860 and 1864 declined from 440 to 289 without the Acts, while from 1864 to 1868, with one year of the voluntary system and three years of the Acts, the decline was only from 289 to 280. At Portsmouth compare the decline in 1863-4 from 503 to 337, with the rise from 1864 to 1868 from 337 to 348. At Chatham and Sheerness the decline in these periods before and after the Acts was about the same. At Shorncliffe without the Acts the ratio fell steadily between 1860 to 1867 from 327 to 215, and rose to 297 in 1868 when the Acts were introduced there. At Woolwich there was a steady decline from 473 in 1860 to 204 in 1865, while, after the introduction of the Acts in 1866, there was a slight rise for that year, a considerable rise for the next, and in 1868 the ratio was only 13 less than it had been in 1865. At Aldershot the ratio fell from 339 to 233 without the Acts, and with them rose considerably in the first year of their operation and the second year left the ratio slightly higher than in 1866. To these results deduced from his table Dr. Balfour, who from being an opponent has become one of the blindest supporters of the Acts, still objects that the ratios in the period under the Acts were swelled by an exceptional increase, either of secondary disease, or of gonorrhœa. If the former, then the Acts have increased the forms of disease that have most serious constitutional effects; if the latter, then Dr. Balfour's inference from his own tables, is directly contradicted, viz., "that the operation of the Acts seems to have been in *counteracting an increase*, rather than in effecting a decrease of gonorrhœa." It is much to be regretted that Dr. Balfour did not furnish us with the means of showing the diminution in particular kinds of venereal disease at these stations, by carrying back the tables produced to the Commission beyond the year 1864.

The second table is a return forwarded from the War Office, showing the effect of venereal diseases on the efficiency of the army serving at home during the 10 years from 1860 to 1869 inclusive." This table, so far as material to our present purpose, gives this return—

Constantly Sick for Enthetic Diseases. Ratio per 1000.	
1860.....23·73	1856.....18·14
1861.....24·7	1866.....16·
1862.....22·32	1867.....17·95
1863.....20·31	1868.....17·82
1864.....19·11	1869.....14·87

To this table is appended a note:—"A change was made in 1869 in the classification of diseases in the Army Returns. Every care has been taken to include the same group of diseases as under the previous classification, but the number for that year should be considered only as a close approximation."

Comparison between 1869 and preceding years is thus unfortunately embarrassed. Excluding 1869, it appears that the reduction in the ratio of venereal disease in the four years 1861-4 prior to the Acts was 5·59 (*i.e.*, from 24·70 to 19·11), while in the four years 1865-8 since the Acts the reduction was ·32 (*i.e.*, from 18·14 to 17·82). Then including 1869, the reduction in the five years 1860-4 was 4·62 without the Acts, and in the five years 1865-9 it was 3·27 with them.

In the navy, it is true, reduction in disease prior to the Acts is not so regular or continuous over a number of years. But even here a decline commenced about 1862 and continued up to the date of the introduction of the Acts. In the navy however, we shall see that other causes tending to lessen venereal disease have not been so complete nor so long in operation as in the army.

Turning now to consider what these causes are, we must refer extensively to evidence not before the Commission; because it is remarkable that the official witnesses, who had at least the means of knowledge, were unable to give any precise information on this point.

(1.)—The attention of government of late years has been especially and continuously directed to the improvement of the moral and physical condition of soldiers and sailors. This is shown by the inquiries instituted, and measures (hereafter more particularly referred to) recommended or carried into effect by the Royal Commission, appointed in 1857 to enquire into regulations affecting the sanitary condition of the army; by the Committee and which was presided over by the late Lord Herbert, on Army Medical Statistics, 1857-8; by the Commission for improving the sanitary condition of barracks and hospitals, which reported in 1861, and which had been engaged since 1857 in carrying out improvements thought by them advisable; by the Committee on Army Medical Statistics, whose report is dated June 1858; by the Committee on venereal disease in the army and navy, employed throughout 1865 in taking evidence on this subject, and whose report is dated May, 1867; and by various orders and regulations, issuing from the War Office and the Admiralty, to which we refer below. Indeed these Acts themselves, with the

inquiry into their operation by select Committees of each House of Parliament, are also proof of the solicitude of Government to leave no measure untried in order to reduce the amount of venereal disease in the army and navy.

(2.)—Regulations designed to detect and secure the prompt treatment of venereal disease in soldiers and sailors have been adopted. Inspections of soldiers for the detection of venereal disease were generally discontinued in 1859. "Without such inspections," the Committee on venereal disease reported, "the proposed periodical examination of women must lose half its value," and of the efficacy of such inspections in preventing the spread of disease and in lessening its effects on the health of the soldier, a great deal of evidence was given to that and other Committees. These inspections have been now revived with limitations designed apparently to favour the operation of the Acts. For now *at stations under the Acts* by an order from the War Office (the date of which is not given, but it was issued prior to 1868) all regiments are inspected on their arrival, and all men going on or returning from furlough are also inspected. This order, it appears, was issued "at the particular request of the police" and in order to "give fair play to the Acts."

In the navy no inspections seem to have been generally made until the enforcement of comparatively recent regulations. But by a circular from the Admiralty, dated February 27th, 1865, reciting that "complaints have been received from places where H.M.'s ships are stationed that venereal disease is greatly increased where leave is granted to the crews," it is ordered that lists shall be prepared for ship-surgeons, containing the names of all un-married men under 35 years of age, excepting such men of good character as may be exempted by the commanding officer; that the names of men, who have neglected to report themselves when diseased, shall be placed on the list; that all men whose names are on the list shall be carefully inspected by the surgeon before a ship's crew is allowed ashore in England on arrival from a foreign station; and that no man be discharged from the sick list after an attack of venereal disease shall have leave on shore for a week after the date of his discharge. The benefit of this order would of course be felt at the chief naval ports, *i.e.*, those under the operation of the Acts. We learn too from the Health of the Navy Report for 1868 (p. 366) that "periodical examinations of the men are now (*i.e.*, in 1868) held, bringing to light cases of disease that would formerly have been

Ven Com Rep
7038

16,244

concealed." Again by a War Office order, dated May 1861, it was directed that "in all cases where a soldier is proved to have concealed venereal disease, thereby rendering the cure more dilatory and difficult, the offence shall be visited by confinement to barracks after convalescence for one month and by deprivation of furlough for the current year," see Dr. Balfour's evidence on this point.

Ven Com Rep
185; 955-6; 1014-5
2126; 2248-9;
3085-8; 3717;
3929; 4699;
4991-2; 5407-8;
5675-94; 7014;
7039

(3.)—Great stress was laid by witnesses before the Committee on venereal disease, on the advantages of ablution in lessening venereal disease, and several remarkable examples of its efficacy (*e.g.*, see the evidence of the Duke of Cambridge, Ven. Com. Rep. 7039) were given. Now nothing is clearer than that improvements in this respect in both services have been constant and remarkable of late years. Lord Herbert's Commission (Rep. p. lxxvi) in December 1857, recommended a proper provision of ablution rooms and baths. The Commission for improving the sanitary condition of barracks reported (Rep. p. 47) that on the commencement of their enquiry they found "hardly a barrack in the United Kingdom provided with the means of bathing; the occasional use of an old horse-trough, or an iron barrack coal box, as a bath, such as we have seen in two or three barracks hardly constituting an exception to the rule;" and that for purposes of ordinary washing the accommodation was utterly insufficient. The Commissioners then reported that they had up to June 1860, (Rep. p. 322) carried out improvements in this respect at a number of barracks. The Committee on venereal disease "attach great importance to the practice of ablution, especially if resorted to immediately after sexual intercourse," and they "strongly recommend that increased facilities should be placed at the disposal of the men, not only in the form of baths supplied with hot and cold water, but also of taps fitted up both in the lavatories and guard-rooms at which men may wash their persons readily and in private." What is meant by the recommendation as to taps is explained by the evidence on which it is founded; and the recommendation it appears has been carried into effect "at some of the larger stations," including of course those under the Acts.

Ven Com Rep
p xxxiii

Ven Com Rep
324; 5750-1; 6390;
6424-5; 6703;
7041

15,863; 16,337-12
16,358

Ven Com Rep
6919; 6994

1715-21; 4813-9;
16,790-3

In the navy the provision of proper means of ablution for the men was made the subject of a special order from the Admiralty, dated July 21st, 1865; and much improvement seems to have resulted from this order.

(1.)—In the army and navy the men are now paid frequently

3315; 3849-33;
4735-7; 4773;
15,766; 16,818

14,882
to Com Evce
1206-8

Ven Com Rep
p xxxiii

instead of at deferred periods; every encouragement is, with effect, given to the men to make use of savings'-banks, or to transmit their money to relations, &c., and the men have consequently become more careful, and are exposed to less temptation to riot and debauchery. On this point the evidence of Dr. Balfour and Mr. Berkeley Hill shows that when arrears of pay have been paid to the army, there has been a consequent increase of drunkenness and venereal disease.

Ven Com Rep
85; 1148-9; 6370
6381; 6982;

(5.)—The Committee on Venereal Disease reported that “the measures which have of late years been adopted to improve the condition of soldiers and sailors, the steps which have been taken to provide means of healthy exercise and recreation and to find occupation for them in their leisure hours, and the additional comfort which has been introduced into barracks and ships, appear to be important means of reducing indirectly the amount of venereal disease in both services, by lessening the temptation of the men to resort to beer-shops and brothels.” The improvements thus referred to had been carried out on the advice of Lord Herbert’s Commission (Rep. pp. xix., xxxii.); and of the Commission for Improving the Condition of Barracks (Rep. p. 56), and consisted among other things in the provision of reading-rooms and libraries, day-rooms where the men could read, smoke, and get refreshments, gymnastic exercises, facilities for athletic games, a new system of canteens, &c., designed to give occupation to soldiers, and to induce them to remain in barracks.

Ven Com Rep
6929; 6979

In the navy, improvements of a similar character were carried out.

Ven Com Rep
606-8; 1020-3;
1147; 6617-23;
6738; 6930-1;
6970; 6982

668; 4832-3;
16,806

11,270-8

Under this head too may be mentioned sailors’ homes, which have been lately established with the best effect, as appears from the evidence given to the Committee on Venereal Disease, and from the evidence before the Royal Commission on these Acts. A remarkable illustration of the benefit of and increased use of these institutions was given by the Inspector of the Metropolitan Police at Portsmouth, who says, “sailors seem to be more decent, and some go to the Sailor’s Home; they do not sleep in the brothels when on shore;” and at the Portsmouth Sailor’s Home, in 1870, the number of beds occupied throughout the year was 17,253, as against 8,345 in 1863.

See 666; 1092-4;
524; 6558; 8855;
5,756-61; 15,868
18,353; 18,381
as to the Army)

It is to measures such as we have mentioned, carried out especially within the last ten years, in conjunction with better education, improved moral and social condition, and more effective discipline in both services, that witnesses before the Commission

1684; 1828;
4733; 4761-3
4803; 48.0
4846-50; 8857;
11 278; 11 348-63;
16,721; 16,795-9;
16,812-27 (as to
the Navy)

attribute an improvement in the morality and conduct of the men, and a great diminution of the temptation to sexual excesses to which they were formerly exposed.

(6.)—The Committee on Army Medical Statistics, which was directed to devise means to enable the government to take immediate measures to check or counteract whatever could affect injuriously the health of the troops, advised an altogether new system of health returns, which, by comparing one regiment with another, would immediately point out evils and their probable causes, and induce a spirit of sanitary emulation among medical officers, &c. (Rep. pp. 27, 29.)

16,602; 18 227
14,886
12,148

Again, army and navy surgeons in the district under the Acts are now more vigilant as to venereal diseases and its causes, since, in their general anxiety to have the results of the Acts fairly tested, they "look much more carefully after the men," and adopt measures that seem likely to lessen this disease.

1724; 3465-7
3477-8; 3833;
6777-81; 6893-9
11,557

(7.) The general decline in venereal disease of late years, the result of improved treatment and other causes entirely independent of the Acts, would appear in the services as well as in the civil population.

15,782; 16,332-3

The improved sanitary condition of the army and navy, and the consequent improved general health of the men, would also have an important and beneficial influence on the intensity and prevalence of venereal disease.

Append B p 115

The general health of the army between 1860 and 1869 appears, from a table furnished to the commission, to have improved more steadily and to a greater degree in the five years preceding than in the five years succeeding the introduction of these Acts.

Such are some of many causes which have reduced venereal disease. It is true that several operated before the date of the Acts; but the effect of them would be gradual, and would be felt as well after as before the introduction of the Acts. Others operated specially in the subjected districts, or during a period nearly coinciding with the operation of the Acts.

16,358; 16,385;

It ought to be added that improvements directed against venereal disease would naturally be introduced earliest and most completely in stations under the Acts, both because the authorities are anxious to give the Acts a fair trial, and because the subjected districts include most of the chief naval ports and military stations, and would on this account be more likely to get the benefit of suggested improvements.

General Popula-
tion

6734-7;
44; 7224-30;
8516; 17,147

415; 725-6;
974-7; 2032;
13,218; 1841

Whether the Acts have affected in any way venereal disease among the general population in the districts to which they are applied, is a question on which reliable data are altogether wanting. The experience of particular medical men, chemists, &c., accustomed to treat this disease, as to the number of patients under their care before and since the Acts, is of too vague a character to support any definite argument. An increase or decrease of patients may have been due to a change in the reputation, or kind of practice, possessed by the particular witnesses. But it should be observed that civilians frequent chiefly a class of prostitutes who, in comparatively few instances, could be subjected to the Acts; and that one certain result of the present system is that prostitutes, who are diseased, frequently go to other districts to escape an irksome detention in hospital, and that prostitutes who have been discharged uncured or incurable from hospitals, go to other districts in order to escape the penalty to which they would be liable under s. 31 of the Act of 1866, did they remain in the same district as before. If, therefore, the subjected districts are purified by the removal of these women, other districts are injured by a consequent increase of disease.





A CRITICAL SUMMARY

OF THE

EVIDENCE BEFORE THE ROYAL COMMISSION

UPON THE

CONTAGIOUS DISEASES ACTS,

1866—1869.

PREPARED FOR THE NATIONAL ASSOCIATION FOR THE REPEAL OF THE
CONTAGIOUS DISEASES ACTS,

BY DOUGLAS KINGSFORD, ESQ.,

OF THE MIDDLE TEMPLE,

LEGAL REPRESENTATIVE OF THE ASSOCIATION DURING THE SITTING OF THE
ROYAL COMMISSION.

COMPLETE IN SEVEN CHAPTERS.

Published separately, Price 4d., post free.

LONDON:

TWEEDIE AND CO., 337, STRAND, W.C.

F. C. BANKS, 50, GREAT MARLBOROUGH STREET, W.

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FOR THE
REPEAL OF THE CONTAGIOUS DISEASES ACTS.

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INTRODUCTION.

IN this work an attempt is made to marshal the voluminous evidence given before the Royal Commission on the Contagious Diseases Acts, with the view of exhibiting the practical operation of the Acts and of estimating their moral and physical results.

Various points are treated in the order that naturally suggested itself to the writer. The first step that the police, employed under the Acts, have to take is to discover the "common prostitutes" in the various districts to which the Acts apply. How they perform this task is considered in Chapter I. The next thing to be done is to subject common prostitutes to the operation of the Acts, either by voluntary submission or by magistrate's order. These processes are discussed in Chapter II.

The consequences of subjection to the Acts, viz., periodical examinations and detention in hospital if diseased, are considered in Chapters III. and IV., the latter of which also contains a comparison of the advantages of compulsory and voluntary hospitals.

In Chapters V. and VI. the effect of the Acts on venereal disease, and their alleged influence in improving public morality and decency, are respectively the subjects of discussion.

Chapter VII. treats the question of abuses under the Acts.

It will be seen that the evidence before the Commission is almost exclusively referred to, but the writer has occasionally, where it seemed to him necessary or convenient, added references to the evidence taken by the Committee on Venereal Disease and by the Parliamentary Committees on these Acts.

CHAPTER VI.

CERTAIN ALLEGED BENEFITS RESULTING FROM THE ACTS.

IN the last chapter we have treated the question as to the effect of the Acts on the diseases against which they are directed. Originally, supporters of the Acts relied solely on their effect in this respect; and it seemed logical to do so, and to test the Acts by their success or failure in attaining their only object. When, however, opponents of the Acts urged with some success that the moral harm of them more than counterbalanced the physical good claimed for them, supporters of this legislation took new ground, and contended that the Acts had done that which was certainly not within their scope or direct intention, viz. : that they had effected a remarkable improvement in public morality and decency. The points of this alleged improvement fall under a few heads, which we will separately examine.

(1.)—The number of brothels is said to have diminished in several districts. By referring to a table supplied by the Metropolitan Police, the reduction claimed by them to have occurred at the stations under the Acts, can be seen.

In the Devonport district the most remarkable reduction is alleged to have occurred, and we may therefore take this station as an example. The number of brothels in that district is said to have been—

1865	356		1868	170
1866	280		1869	131
1867	206		1870	121

These returns were made by Inspector Anniss, who states that he formed his estimates of the numbers by going round from house to house in the early part of the day, between eight and one o'clock; and that he means by a brothel "a house occupied by prostitutes, or resorted to for the purpose of prostitution." By this daily inquiry, pursued for about a fortnight, the numbers not only of brothels, but also of prostitutes, were ascertained.

Now what is noticeable first on this return is the very much greater decrease in the number of brothels between the years

Decrease of
Brothels.

Append B. p 786

25-42
492-600

814-5

847-9

1865 and 1868 than afterwards. We show below that the numbers of prostitutes in this district for the above years were grossly exaggerated by including large numbers of women, suspected, but not ascertained, to be prostitutes. This fact explains a similar exaggeration in the numbers of brothels. From 1865 to 1868, Inspector Anniss took as a brothel every house occupied or resorted to by women *suspected by him* to be prostitutes, the number of whom was gradually decreasing as these suspicions were tested by inquiry in the course of the partial registration that took place in these years. At the end of 1868, registration of prostitutes was complete, preparatory to the commencement of the fortnightly examinations in January, 1869. Accordingly for 1869 and 1870, Inspector Anniss took to be brothels, houses occupied or resorted to by *registered* prostitutes.

It is evident too that in the visits during which these returns were made, the inspector could not have had full time and opportunity for the necessary observation and accurate inquiry. With respect to houses, not inhabited by prostitutes, though used by them as occasional resorts, the inspector could not by a visit in the day-time have obtained grounds for deciding on the character of the house. It was to a great extent mere guess-work, with a bias on his part to call every house a brothel, as to which he felt any doubt or suspicion. When, however, a registration of prostitutes was carried out, greater caution became necessary, and then on the statement of Superintendent Wakeford, "the police took steps to ascertain by whom the house was kept, the character of the person keeping it, and the arrangements of the house, before they would decide whether it was a brothel or not."

The local police make annual returns of the number of brothels, which are printed in the Judicial Statistics. According to these returns the number of brothels was :—

	1863	1864	1865	1866	1867	1868	1869	1870
Devonport	39	30	40	46	38	30	32	39
Plymouth	115	100	90	75	86	75	64	97
	154	130	130	121	124	105	96	136

We cite these returns only to show, from the relative numbers, the extreme improbability that Inspector Anniss's returns are accurate in showing a decrease in the number of brothels between 1865 and 1869, from 356 to 131; for, had a decrease so

remarkable taken place, the local police could not have failed to have observed it, and it would appear on their returns. But, as to the absolute numbers, the returns made by the local and the special police may, of course, differ from their defining "brothel" differently, or from other causes. As exemplifying the effect of the Acts on brothels, Inspector Anmiss also instanced a particular street, Castle Street, in which, he said, "in former times" nearly every house was a brothel, while "since the operation of these Acts" a great change had occurred and now there is only one brothel. The accuracy of this statement, which apparently was the basis of that in Colonel Henderson's Report as to the marvellous effect of the Acts on the state of this street, fortunately could be tested. By the evidence of a magistrate and the superintendent of the local police at Plymouth, it appeared that the "former times" were times long anterior to the introduction of the Acts, and that the alteration in the state of Castle Street was due chiefly to the removal of special causes that formerly kept soldiers and sailors in the immediate neighbourhood of this street, and to the action of the local magistracy in suppressing the bad houses that were there.

The special police attribute the alleged diminution of brothels to the Acts, on two grounds: because the number of prostitutes is less and therefore fewer brothels are required, and because the visitation of brothels by the police is said to "induce girls to return to their friends, and thus these places are kept down." The lessening of the number of prostitutes is considered afterwards. As to the visitation of brothels by the police, this could be done as well by the local, as by the special, police, and with as good effect in every way. Indeed it is doubtful, according to the opinion of Captain Harris, whether the police employed under the Acts have legal power to enter brothels, and one of Captain Harris's proposals for amending the Acts is that this power should be given to them.

If the Acts are the cause of the large diminution of brothels that appears on the police return, it is very singular that the diminution should be least when the Acts were most strictly enforced. Till 1868 at Devonport only a comparatively small proportion of the whole number of prostitutes was subjected to the Acts, viz.: those only who were informed against as diseased. No regular visitation of all brothels was then necessary, nor became so till the enforcement of fortnightly examinations, from January, 1869. Yet the brothels, according

5122-6; 8785-800

81; 675

9174

13,383

See Append. B.
p. 780

to this return, decreased at the rate of from forty to eighty a year till 1869, while between 1869 and 1870 the decrease was only ten.

The Acts probably tend in one way and in that only to reduce the number of brothels, viz.: by inducing prostitutes who wish to evade the Acts, not to live in, or resort to, notorious brothels where the police can get at them. But the result of this is rather to change the species of brothels than to cause any material permanent reduction in their number. Another result, too, is to increase the difficulty in carrying out the Acts, and at the same time vice, before to some extent localized, is sown broad-cast over the district; as Mr. Aeton puts it (*On Prostitution*, p. 49), "diffusion is lunacy on grounds both of morals and policy."

Inspector Anniss, whose assertions are usually bold enough, was sure that no part of the diminution in the number of brothels was due to direct action by the local police against them. The local police had "taken no action in the matter," or "no more during the last fifteen years than during the previous fifteen years." After this assertion it is surprising to find from the evidence of magistrates and local police of this district that very exceptional action had been during the last five or six years taken not only against regular brothels, but against beer-houses, the resorts of prostitutes.

The result of action against beer-houses in lessening the number of places to which prostitutes resort (*i. e.* brothels, on the police definition) is spoken to by several witnesses from other districts.

If the Acts be thus repressive of brothels, this result should appear in all districts subjected to the Acts. Yet at Portsmouth, there has been a very slight, if any, decrease in the number of brothels. On the return to which we have referred (*Append. B.* p. 786), it is true that a reduction appears to have taken place from 263 brothels in 1865 to 195 in 1870. We find, however, that the number for 1865 is according to the return of the borough, and not of the special police (*see Col. Henderson's Report*, p. 8); and the borough police may have had a definition of "brothel" differing altogether from that of the special police. The first return of the number of brothels in Portsmouth made by the special police, was that of Inspector Westbrook, in 1866, who says that then there were 208 or 209. What object, except that of exaggerating the original number, there can be in giving in the place of this the return of

3175 ; 9140 ;
13,010 ; 17,550

10,545-53 ;
13,010-2 ; 14,431 ;
16,910 ; 17,550-1 ;
18,096

8318-9

948, 965

2000-3 ; 5011-3 ;
5097-1 ; 6389-90 ;
6414-6 ; 8295 ;
8345 ; 8665-8 ;
8725-33 ; 8779

12,306 ; 14,207-8 ;
19,984 ; 20,264

11,105 the local police, is not clear. The reduction then at Portsmouth must be taken, according to the returns of the special police to be from 208 in 1865 to 195 in 1870, and as before shown, with respect to Devonport, there is every likelihood that prior to the complete registration of prostitutes in 1869, the number of brothels would be exaggerated. It may therefore be doubted whether, in fact, there are fewer brothels now in Portsmouth than there were before the Acts. In Chatham and Sheerness the number of brothels has increased between 1865 and 1870 from 45 to 65 and from 18 to 24 respectively.

Append B. p.
786

13,643-4

81-2; 496; 1097
13,414

12,629; 14,222
14,277; 14,408-10;
14,455-7; 18,396;
19,739; 19,802

14,338; 16,132

See 952; 5014;
5418-23; 6489;
609; 6836; 8322-3
722-4; 12,311-2;
9,588-98; 20,089

It should be observed, as bearing on this question, that even the police do not seem very well agreed as to the definition of "brothel." Capt. Harris observes that "some people designate a brothel a place where women lodge"; but he himself "considers the true definition of a brothel is where the person keeping it receives the proceeds of prostitution." This definition, however, is not the one adopted by the police at Chatham and at Devonport, who again differ in the definitions they supply.

Lastly, we may remark that brothel-keepers appear to be nearly unanimous in favour of the Acts, and to find the Acts a direct source of considerable gain and advantage. The Acts give the police no power to interfere with brothel-keepers, unless they knowingly harbour diseased prostitutes, and so become liable to a penalty under s. 36 of the Act of 1866; and this section is very seldom enforced. If, however, it were proved that the Acts are strongly repressive of brothels, we should still contend that repression might be effected, in as great a degree, or greater, without the aid of the Acts.

Hitherto there has been, and still there is, a doubt as to the expediency of direct repression of brothels. But, if repression be desirable, the laws at present existing against brothels are, or would be, with such slight changes as were suggested by various witnesses, more effectual for that purpose than the Acts.

In London, even with imperfect laws, a very partial enforcement of them, and a large increase in the population, there are much fewer brothels of late years since some action has been taken against these houses. We may refer to Metropolitan Police Returns furnished to Mr. Acton by Sir R. Mayne and Captain Harris, printed in "Acton on Prostitution," pp. 4, 6. From these it appears that the number of brothels in the Metropolitan Police District was 2825 in 1857, and only 2119 in 1868, while a particular, and the worst, class of brothels,

viz., "houses where prostitutes are kept," has diminished in number during the same period from 410 in 1857 to 2 in 1868. Probably a still larger proportionate reduction in the number of brothels has occurred in 1869 and 1870, as a result of the new licensing law.

(2.)—The Acts are said to have diminished the number of prostitutes.

On referring to the police returns, we find that the only stations at which this diminution appears to have taken place in a noticeable degree are Portsmouth and Devonport.

At Portsmouth the number is said to have decreased from 1355 in 1865, to 590 in 1870.

At Devonport the decrease is said to have been from 1770 in 1865, to 557 in 1870.

Now as to Devonport, we have some account of the manner in which the earlier returns were made. Inspector Annis says that he got at the number of 1770 prostitutes, in 1865, by going round to the brothels, and that he took the names of 1720 out of this number, "putting them down in pencil, only to get at the right number very roughly." In the preceding years, 1863 and 1864, the Inspector says that he found a still larger number of prostitutes in the district, viz., 1960 and 2020 in those respective years. Inspector Annis's Superintendent, Mr. Wakeford, says that the return for 1865, and for all years prior to 1869, were "necessarily loose calculations," and it seems to us that they are so "loose" as not to deserve any serious attention.

The numbers given from year to year prior to 1869, when for the first time all prostitutes known to the police were registered, are, in fact, merely the numbers of women *suspected by the police* to be prostitutes. In 1863 and 1864 no prostitutes at all were registered in Devonport, and in 1865 out of the 1770 alleged prostitutes only 37 were on the register. From year to year, till the latter part of 1868, the number of prostitutes registered, though gradually increasing, was still a very small proportion of the whole alleged number. But towards the close of 1868 or beginning of 1869, with a view to enforcing periodical fortnightly examinations, all known prostitutes were subjected to the Acts by voluntary submission or magistrate's order, and thereupon became registered prostitutes.

It appears to be absurd to compare the numbers of *registered* prostitutes in 1869 and 1870 with the number of *suspected* prostitutes in the years preceding; in the former case some test of the character of the women was obtained, in the latter case

Decrease of pros-
titutes
Append B. p 786

500-80

821

503; 565

228; 408-11; Sec
815-8; 921-2;
818-51

123

580

Append. B. p 780

227

there was no test at all, and, therefore, as we show below, every likelihood that the number would be exaggerated.

289; 8691; 8715; Superintendent Wreford of the Plymouth Local Police,
8748-66 Mr. Ryder, a Devonport magistrate, who put in the returns of
ee too 1872-83; the local police for that borough, and other witnesses showed the
2091-2; 3175-6 gross exaggeration in the numbers given by Inspector Anness;
and the exaggeration seems glaring on the face of his return when
it is considered that if there were 2000 prostitutes in the Devon-
port district, 1 in every 9 women between the ages of 15 and 30
must have been a prostitute.

8354; 20,306 Further, Dr. Row, a Devonport magistrate, showed that the
1874-7 number of prostitutes, brought up by the police on "night
charges" for disorderly conduct in the streets, was about the
same from year to year between 1865 and 1870; on which fact
he came to the inevitable conclusion, that either the police were
wrong in figures showing so great a reduction in the number of
prostitutes, or else that 557 prostitutes in 1870 committed as
many disorders as 1770 in 1865.

ee 1622; 13,911 If so remarkable a diminution in numbers had really occurred,
15,180-1 it is hard to see why supporters of the Acts should boast of it,
for, on evidence to which we have before referred, it seems certain
that the direct result would have been a great increase of venereal
disease among the men who frequented this smaller number of
women. The visiting surgeon for Devonport states that the
1597 proportion of prostitutes infected with syphilis in that district is
now large, and that "out of the 550 now remaining at least 80
are syphilitic, and liable to constant returns of syphilitic
1622-4 affections." He apparently attributes this to the reduction in
the number of prostitutes, and though he "cannot speak to that
great reduction" (from 2000 to 500), it is his "private opinion
that the number could be too much reduced considering the
morals of the men who reside there."

At Portsmouth we find that the number given for 1865, viz. :
1355, was not ascertained by the metropolitan police, but was
"taken from the borough police register." This is admitted in
Colonel Henderson's report (p. 8), though no note to this effect
is appended to the return furnished to the Commission. Here
again the borough police return seems to have been selected
because the number there given was a high one, for in the early
part of this same year, 1865, Inspector Westbrook, of the special
police, ascertained the number to be only 789; even that num-
ber was probably too large because, as said before, it would be
the number of suspected, not of registered, prostitutes. The

tendency of police to exaggerate the number of prostitutes, until suspicion is brought to a definite test, is remarkably illustrated by Inspector Westbrook's own experience at Southampton. He says that on inquiring the number of prostitutes there from the superintendent of the local police, he was told that there were 1300, and that 800 was the number returned (for the judicial statistics) every year. An active officer of the local police was sent about with Inspector Westbrook for four days, and they "got 220 prostitutes, about a great number of whom there was a doubt, for they were merely surmises, and now there are only 120 (*i. e.* registered) prostitutes in Southampton."

At Chatham the number increased from 220 in 1865 to 281 in 1870, a fact the more remarkable inasmuch as 272 women left the district in 1870. An increase also took place at Aldershot and Windsor till 1870, when there was a decrease. The police account for this "apparent increase" in the above districts by the statement that the "entire number of women was not obtained in the first instance" for these districts. The real explanation appears to be that the police in these districts made a complete register at an earlier period than elsewhere, and returned the numbers of registered, and not of suspected, prostitutes from year to year. The opportunity for exaggerating the numbers in the earlier years was thus absent. The inspector of metropolitan police at Aldershot considers that the effect of the Acts there is not to lessen the number of prostitutes, the apparent decrease in 1870 arising from there being less troops in camp.

The only comparison, on which any argument can be based, is that of the numbers of women actually registered. At two stations, Portsmouth and Devonport, there was a decrease in the number of registered prostitutes between 1869 and 1870. But this does not prove that the whole number of prostitutes in these districts was less, unless every prostitute be registered. This raises the question how far "clandestine prostitution," *i. e.* prostitution not subjected to the Acts, exists, and whether it has increased or decreased since the Acts came into operation. These are questions to which a precise answer by direct evidence is impossible, because clandestine prostitutes are those that are avoiding observation, and therefore their numbers at different periods cannot be ascertained. Inspector Anniss, of course, is prepared to state the exact number of clandestine prostitutes in Plymouth, "he has at this time in that district only thirty-seven clandestine prostitutes," but it does not appear

1,465-6

Append. B. p 781

Append. B p 786
noteAppend. B. p.p.
781-2

14,295-301; 14,371

Clandestine
Prostitution.

656; 687

what he means by "clandestine prostitute," nor how he knows the number of prostitutes who, since they are acting clandestinely, have escaped his observation.

Mr. Sloggett is certain that clandestine prostitution has "decreased in an extraordinary degree," but it appears he is speaking only of "girls living at home with their parents," who used formerly to frequent public places "avowedly for the purpose of indulging in prostitution." That such girls, wishing to avoid registration, should have ceased to behave in public in a manner that would have ensured their being registered, is a matter of course; but this does not prove that they have ceased to be prostitutes.

Meaning by "clandestine" all unregistered prostitutes, there can be no doubt that the class exists in these subjected districts. In Devonport, as we have seen, the police consider that every prostitute is a "common prostitute" and subject to the Acts, but they cannot possibly obtain evidence of prostitution in the case of women who practise it privately. Modes of eluding the police, and the fact that they are eluded, are stated by several witnesses from this district.

In other districts, where a different interpretation is given to the term "common prostitute," the police do not profess to subject private prostitutes to the Acts. Inspector Smith, of Aldershot, says he could not bring a prostitute who lived and received men in her own room, under the Acts, and out of forty-eight prostitutes reclaimed by one lady in Portsmouth and Devonport, only five were registered prostitutes. At Woolwich, in the opinion of the local police and of the registered prostitutes, the number on the register bore a very small proportion to the whole number of prostitutes in the district.

Mr. Williams, of the Rescue Society, whose experience and means of information have been exceptionally great, states that he has found a very considerable number of unregistered prostitutes at Devonport, Southampton, Woolwich, Chatham, and Dover.

The police, too, doubtless registered prostitutes more readily in the first instance than they were able to do afterwards, for the women were less on their guard, and were usually living in known brothels and in a definite part of the district. But now it appears that the women have become tolerably familiar with the course taken by the police, and have scattered over the districts, quitting the brothels and neighbourhoods where they were formerly found.

Whether the Acts increase the clandestine class, *i.e.*, whether from year to year the ratio of unregistered to registered prostitutes is an increasing one, cannot be decided by direct evidence. But that this has been, from various causes, the tendency of the Acts is the opinion of a number of witnesses, to whose evidence it will be enough to refer. The system in Paris has without doubt had this effect, and though that system differs in detail from our own, yet the motive, *viz.*, a wish to escape the restrictions that registration involves, is at least similarly operative under each system.

That a certain class of prostitutes desire to escape from the operation of the Acts there can be no doubt. The extension of limit in the subjected districts, given by the Act of 1869, was intended to counteract an evasion of the Acts spoken to by many witnesses before the Committees of the Lords and the Commons. And the same evasion still continues, prostitutes either remaining in the district and practising their calling in a way that escapes observation or control, or going to unsubjected towns to practise prostitution there.

We quite admit that police action of any kind against prostitutes will reduce their *apparent* number; *i. e.* to say the number *known to the police* after such action will be fewer than before that action was taken. But such an apparent reduction in the number of prostitutes is not peculiar to districts under the Acts, nor is the cause of that apparent reduction necessarily action under the Acts. For example, in London, the police have of late years attempted to bring prostitution under some degree of control by prosecuting prostitutes for soliciting in the streets, by compelling the early closing of night-houses, by prosecuting brothels, and generally by checking or repressing many resorts of prostitutes. Accordingly we find on the Metropolitan Police Returns that there has been a large apparent reduction in the number of prostitutes within the Metropolitan Police District. Quoting the returns, before referred to, supplied to Mr. Acton by the late Sir R. Mayne and by Captain Harris, (*Acton on Prostitution*, pp. 4, 6, 2nd ed.), it appears that the number of prostitutes was 8600 in 1857, and 6515 in 1868.

The conclusions to which we come on this allegation of a diminution in the number of prostitutes as a result of the Acts are, that the comparison of the present number of registered with the former number of suspected prostitutes is altogether illusory; and that any diminution in the number of registered prostitutes is more than counterbalanced by the numbers who

evade registry under the Acts, either by leaving the subjected districts and practising prostitution elsewhere, or, if remaining in the district, by practising prostitution privately or clandestinely so as to avoid subjection to the acts.

Reclamation of prostitutes (3.)—The Acts are said to have effected the reclamation of a large number of prostitutes.

Chapter IV

From the various Lock Hospitals many prostitutes have been sent into homes, and through these homes a portion of them have been reclaimed. We have already endeavoured to form an estimate of the reclamations thus effected, and to consider how far they may be claimed as a result of the Acts.

en. Com. Rep.
p. xxxv.

There are two other agencies which are also said to have reclaimed prostitutes. Dr. Balfour, in his protest against the report of the Committee on Venereal Disease, says—"That much may be done by judicious sympathy with the women in Lock Hospitals is a well-known fact; but this may be equally accomplished without the aid of weekly inspections. It will scarcely be suggested that the work of reformation is likely to be carried on by the examining surgeon, or by the superintendent of police."

Chapter III.

322; 611; 675

Some of the evidence before the Royal Commission, however, contradicts Dr. Balfour's expectation. We have seen that the visiting surgeon of Aldershot thinks that the prefatory advice given to prostitutes about to undergo examination has been instrumental in reforming them. In another district, Devonport, the police say that they have in many instances sent prostitutes back to their friends. Of the number of these reclamations by the visiting surgeon and the police we have no details.

pend. B. p 778

The whole "number of women removed from the register" since the Acts came into operation will be found in a return furnished by the police. A classification is given of the numbers who "left the district," "entered homes," and were "restored to friends." (The last heading would more properly be "restored or returned to friends," since it includes, not only women actually sent to friends on leaving hospital, but women known or supposed by the police to have returned voluntarily to their friends.) Some reductions in the numbers should be made (as illustrated by the mode of returning the reclamations from the Royal Albert Hospital, Devonport) for the cases in which women, after removal from the register, have returned to the district, been again registered, and again removed from the register. As we cannot make these deductions with any approach

e Append. B.
806

to accuracy, we will take the numbers as they stand. It appears then, by this return, that in all the districts under the Acts between 1865 and 1870, 3900 registered prostitutes left the district, 634 entered homes, and 1866 were restored to friends.

The first question that occurs is what proportion of the women thus removed from the register were actually reclaimed. Now with respect to those who entered homes, or were restored to friends, from the Lock Hospitals of several districts, we have already shown that, on the statements of those connected with hospitals and homes, the proportion of permanent reclamations amounts only to a small per-centage on the whole number so sent away. These statements are reliable, because the matrons of the hospitals and of the homes often keep up some correspondence with, or have other means of tracing the course of, women who have been under their care.

But with respect to the women who leave the district, or who return to their friends otherwise than from hospitals or homes, no means of tracing them exists. It is not suggested that they correspond with the police, and it is impossible, and would be injurious to the women if it were possible, that the police should trace them when they have left the district, and have ceased to be subject to the Acts. Inspector Westbrook, of Portsmouth, speaking of such cases, says that he loses sight of the women altogether; he would not think of making inquiries about them because they are free; they go to Ireland, Liverpool, and other places, and are dispersed from his observation altogether. Superintendent Mc.Donald, of Portsmouth, says they are simply entered "as having left the district because we knew nothing about them."

One piece of evidence on this point must be dealt with merely for the purpose of exposing its falsity. Inspector Anniss, of Devonport, says that "certainly 90 per cent. of those removed from the register are reclaimed; it is within bounds to say 90 per cent." This statement appeared so extraordinary that repeated questions were put to Anniss about it. He reiterated the statement, and added that he "found by careful inquiry that 90 per cent. of the women removed from the register are now getting an honest livelihood;" which is strengthening a former statement, that he ascertained as far as possible "when removing their names from the register," but could not tell whether they relapsed into "their old habits after a time, unless they come back to the district." What possible means this witness could have had of making this "careful inquiry" in the

Chapter IV.

11,207-21; 11,435

10,244-6

614

969-73; 1126-8;
9331

1132-5

1131

Append. C. p. 817

case of women who go away, as he says, "throughout the kingdom," of course he does not explain, nor how he could, without gross impropriety, institute inquiries about women reclaimed from prostitution. The statement, we do not hesitate to say, is worse than reckless, for though Inspector Anniss was careful not to indicate the grounds on which he based his statement, we think there can be no doubt that he based it on a return (probably made by Anniss himself, but) put in evidence by his superintendent, Mr. Wakeford. This is intended to shew that of the women removed from the register in the Devonport district, the per-centage of those who "relapsed into prostitution in the district or elsewhere" was 9·93, *i.e.*, that that per-centage was *known* by the police to have so relapsed. Anniss then assumes that none but those known to have returned to prostitution did so, and on this absurd assumption has the effrontery to assert that 90 per cent. are permanently reclaimed.

We confess that after this and similar specimens of Inspector Anniss's caution and accuracy, we are not disposed to give much credence to his evidence, or the returns prepared by him.

11,425-33

See Append. B.
pp. 806-10

At Devonport we find from this table that out of 2095 women removed from the register, only 63 are said to have returned at any time to prostitution within that district; while at Portsmouth, as Inspector Westbrook says, out of 417 removed from the register, 55 returned to prostitution within that district *within the year*. We should like to have Inspector Anniss's explanation of this difference of the proportions in Devonport and Portsmouth, and the singular difference in the number of women re-registered, after removal from the register, at Devonport and every other district.

The next question is how far those reclamations that have occurred are due to the influence of these Acts.

Append. C. p. 829

Now we have seen that the special police of one district, *viz.*, Devonport, are said to have sent some prostitutes to their friends. Assume that in every district the police have sent large numbers of prostitutes to their friends, can this in any way be used as an argument for the Acts? This forms no part of the duty of these police, either by the wording of the Acts, or by the instructions given to the police. On the contrary, their instructions are expressly to bring all prostitutes immediately under the operation of the Acts. Again, out of what funds are the expenses of women sent to their friends by the police paid? The Acts provide no such funds. But we venture to think that the extra-official benevolence of Inspector Anniss (the police witnesses from other districts make no similar statement), or of any other policemen,

in reclaiming the fallen cannot be admitted as an argument in favour of the Acts.

Chapter IV. We have in a former chapter discussed the question as to how far reclamations of women while detained in certified hospitals can be said to be the result of the Acts. We will not here repeat what we then urged, but we will merely say that the only provision in the Acts that can in any way be said to contemplate the reclamation of women is sect. 12 of the Act of 1866 requiring "adequate provision for the moral and religious instructions of women detained" in certified hospitals. Now, assuming that every woman sent to homes or to friends from hospital may be fairly said to be reclaimed through the Acts (a position which we altogether deny) we wish to call particular attention to the very small proportion of women who are so sent. Taking again Devonport as an example, both because information as to that district is more complete and because Devonport is said to afford the best specimen of the reclamatory results of the Acts, what do we find?

Append. B. p.780 The police returns from Devonport, profess to show that between 1865 and 1869, 187 women "entered homes" and 649 were "restored to friends," *i.e.*, in all 836 women. But in this period, as we show elsewhere, only 186 women (the hospital returns, proved to be inaccurate, give 317) "entered homes" or were "restored to friends" from the Devonport hospital. As to the women asserted by the police to have been reclaimed in the above period, the great proportion (*viz.*, 650) were, if reclaimed at all, reclaimed by agencies altogether independent of the Acts.

Chapter IV. Whatever may be the number of actual reclamations since the Acts came into operation, no argument in favour of the reclamatory influence of the Acts can rest on this, unless it be proved that the number of reclamations is greater after the Acts than it was before. This we submit is not proved. Particular homes may receive more women than they did before the Acts, but this is because the particular home, where this has occurred, was specially selected to receive women from the lock hospital of the district, probably to the exclusion of voluntary applicants. The Rev. Mr. Ellison, Vicar of Windsor, finds that there is a "diminished chance of reformation under the Acts," for, before the Acts, into a home established by himself, he received for nine years "an average of 28 every year," while since the Acts the "number became gradually less until there was not a sufficient number to justify keeping the home open." In the three years 1868-70 of the Acts at Windsor, only twenty women have entered homes.

The machinery provided by the Acts, of course, brings prostitutes more under observation than before. But there is an obvious fallacy in assuming that, if this observation shows a certain number reclaimed, therefore as many or more were not reclaimed before the Acts, when like opportunity of observation was wanting.

Then these returns of women reclaimed under the Acts are swollen by including those reclaimed voluntarily, or by the efforts of benevolent persons acting altogether independently of the Acts. Mrs. Butler's experience has been that about "a-sixth of this unhappy class quit their trade year by year, not by death or by going into refuges, but by voluntary reclamation." Several witnesses concur in saying that women remain on the average only a short time in prostitution. In London "in 100 consecutive cases, the average time on the streets was found to be just over a year." Mr. Acton, in his book on Prostitution, is at some pains to establish a like fact. It must be remembered too, that in every subjected district there are one or more associations for the aid and reclamation of fallen women.

Far from aiding reclamation, we believe that the whole tendency of the Acts is to obstruct it. We have before considered the effect of the Acts in confirming women in prostitution, some being degraded and made shameless and reckless, some having the sense of a certain status and privilege given to their calling, and all finding inducements to continue prostitution greater than before. Increased inducements to prostitution are enumerated under the next heading.

In addition to this there is a practical difficulty in the reclamation of a registered prostitute. Short of leaving the district altogether, the only way of getting off the register is by one of the modes provided by the statute, viz.: application to a magistrate, or to the visiting surgeon. Each of these modes results in an inquiry by the police, and this causes the very publicity that a woman wishing to reform is of all things desirous to avoid. Take as examples two cases brought before the Commission. In both instances the police go and make repeated inquiries about women, who have left prostitution and are lodging in the houses of perfectly respectable people. A registered woman is worse off in this way than a ticket-of-leave man; for the direct inquiry of the police, made on her assertion that she has ceased to be a common prostitute, tends to defeat her object, to prevent her getting honest employment, and to drive her back into the state she desires to quit.

12,957-61

8491; 17,497-8;
19,977

12,949-50

11,441-2; 12,949;
18,250

See 20,293-4

8269; 8303;
19,926-31

6945-6; 8429;
8438-46; 13,074;
17,405; 17,459;
18,045-6; 18,221;
18,362

Then in the case of women having some regular employment, though occasionally practising prostitution, registration under the Acts must cause loss of employment, and they are driven to regular prostitution as the only means of subsistence.

Append. D p 836

A passage from a memorial addressed to the Home Secretary by opponents of the Acts, that, when taken with its context, obviously does no more than put this fact in another form, was absurdly and unfairly read by two witnesses before the Commission and said to amount to an apology for, or a defence of, prostitution.

5918-21; 5043

The alleged aid given by the Acts to the reclamation of women is the single argument of supporters of the Acts on the moral aspect of this legislation. "The Acts are not immoral," say they, "because women are reclaimed." But though reclamation is most desirable on philanthropic grounds, what moral significance has it standing by itself, or how can it alone lessen prostitution?

20,059-60

Prostitution will follow pretty much the law of demand and supply. If you improve the morality of men, and reclaim them from fornication, there will be less demand for prostitutes. But the effect of the Acts has assuredly not been in the direction of lessening fornication, and at the same time, on the evidence of the strongest supporters of the Acts, their tendency has been to make prostitution a more profitable and tempting calling. These positions we will consider:—

12,399; 12,869-72;
18,349
18,388; 19,616;
20,210; 20,290-2

(a.)—The Acts tend to increase fornication. So far as this results from the belief that fornication is physically safer than before, we have already discussed this matter. But a still more important tendency of this legislation is to encourage the notion that fornication is not only venial but necessary. One witness, the Vicar of Windsor, put the point well, when he said—Supposing that at one of our Universities the Acts were substituted for the Proctorial plan of punishing fornicators and prostitutes, the "indirect result would be, with men and women, to lead to the impression that the authorities—*i.e.*, the law which the authorities were administering—did not care so much for the sin as for the physical results, or that they looked upon the sin as a necessity; and law is a great educator." Supporters of the Acts do not venture to assert that fornication is less commonly practised, except by the suggestion (considered afterwards) that solicitation in the streets being less, the temptation to fornication is also less.

20,276

71-5; 962;
1088-9; 4186;
4277-9

(b.)—The inducements to take to, or remain in, prostitution have been greatly increased by the Acts. Supporters and opponents agree in this, that since, and as a consequence of the

1905; 2029;
7112 4; 7 66;
12,999; 14,711

Acts, prostitution is carried on under more favourable and more comfortable conditions in certain respects. Prostitutes are now much richer than they were, and derive greater profit from prostitution. They used to be starving and wretched, now they are well-to-do, and their "income is rather too large."

Before the Acts prostitutes were "crowded together in miserable apartments," "without clothing," "covered with dirt and vermin," "with no beds to lie on," &c., &c.; since, and through the Acts, they are well and comfortably housed, well dressed, cleanly and attractive. It is extraordinary that any intelligent supporter of the Acts should allege that these improvements in the condition of prostitutes are an advantage. If prostitution be a good thing, then it is an advantage to make conditions favourable to its existence, and in this view it is a matter of congratulation that the squalor and wretchedness that attended prostitution are now removed. But if prostitution be a bad thing, it is surely not useful to make that calling a comfortable and an attractive one. As is observed by Mr. Simon, these improvements in the condition of prostitutes are "no doubt changes on which the users of these persons may congratulate themselves, but they cannot, without extreme abuse of terms, be described as of any moral significance."—(11th Rep. of Medical Officer to the Privy Council, p. 19.) To raise the physical is often to raise the moral condition; but this cannot be when the improvement in physical condition is the direct result of greater profit derived from moral degradation. Else we may hope to amend the thief by making picking pockets a more lucrative occupation.

Our conclusion then is that, even were it proved that the Acts further the reclamation of prostitutes, no real good would follow. For the demand for, and supply of, prostitutes being stimulated by the Acts, "the only result would be the rapid re-filling of the class, all the tendencies towards prostitution remaining and increasing."

(4.)—In one district there is said to be less solicitation in the streets than before the Acts. This district, as will have been anticipated, is Devonport. The special police there say that solicitation has almost ceased to exist, at any rate as compared with a former state of things. And other witnesses, whose accounts appear to be derived from their own observation 20 or 30 years ago, give sad descriptions of scenes of disorder in particular quarters of the town.

The special police do not profess to deal, or to be able to deal,

89; 110; 756;
961-3; 1003;
1067-70; 4258-9;
6741; 6909-11;
10,718; 10,905;
13,681-8; 18,335

276-9; 319; 964;
4258; 5056; 9136;
11,195; 14,218-20;
14,367; 14,431-4

5682-5; 11,301;
12,869-78;
12,895-6;
13,032; 20,059-60

19,588

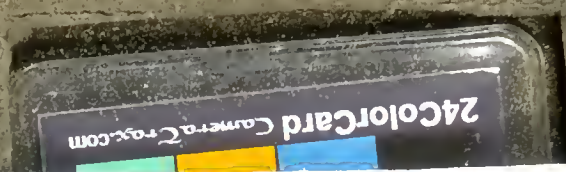
Street
Solicitation.

161; 266; 739;
746; 1066

3837-41; 384-5;
4186







DIRECTOR

SOME TIGHT
GUTTERS

